County Clerk / Elections

701 Ocean Street, Room 310, Santa Cruz, CA 95060
Phone: 831 454-2060 Toll-free: 866-252-5900 Fax: 831-454-2445 TDD: call 711
E-mail: info@votescount.santacruzcountyca.gov Web sites: www.votescount.santacruzcountyca.gov
Tricia Webber, County Clerk/Registrar of Voters

Dear Voter,

The Santa Cruz County Elections Department received your voted ballot in its envelope; however, we determined that:

- The signature on the envelope does not compare to the signature we have on file for you; OR
- You failed to sign your envelope.

For your ballot to be counted, you must sign the signature verification statement below and return this form by 5pm, Wednesday, November 25, 2026 (Elections Code §3019).

Read these instructions carefully. Failure to follow these instructions may cause your ballot not to count.

1. Complete the statement below and make sure you sign your name.
2. Use one of the following methods to return your statement:
   - **In person** to Santa Cruz County Elections, 701 Ocean St., Room 310, Santa Cruz
   - **FAX** this form to 831-454-2445.
   - **Email** a photo or scanned copy of this form to info@votescount.santacruzcountyca.gov.
   - **Mail** this form using the enclosed envelope. Mail it in time to reach us by the deadline.

Please note that the signature provided on the completed statement will be added to your registration record to be used for signature comparison purposes in future elections.

If you did not vote this ballot, please let us know immediately so we can refer this case to the District Attorney for investigation.

Statement

I, _____, am a registered voter of Santa Cruz County, California. I declare under penalty of perjury that I received and returned a vote-by-mail ballot, am the person whose name appears on the vote-by-mail envelope, and that I have not and will not vote more than one ballot in this election. I understand that if I commit or attempt any fraud in connection with voting, or if I aid or abet fraud or attempt to aid or abet fraud in connection with voting, I may be convicted of a felony punishable by imprisonment for 16 months or two or three years. I understand that my failure to sign this statement means that my vote-by-mail ballot will be invalidated.

Voter's Signature:

X	Date:

If the voter cannot sign their name, have the voter make a mark in the box above and then the witness signs here: _____

Address where you live in Santa Cruz County:

_____
Number & Street

_____
City State Zip