



County of Santa Clara

Registrar of Voters

1555 Berger Drive, Bldg. 2
San Jose, CA 95112
Mailing Address: P.O. Box 611360, San Jose, CA 95161-1360
1-408-299-VOTE (8683) 1-866-430-VOTE (8683) FAX: 1-408-998-7314
www.sccvote.org



Military/Overseas Ballot Instructions November 3rd, 2020 Presidential General Election

The enclosed Vote by Mail Ballot has been sent to you early because our records indicate you are a military or overseas voter.

To vote your ballot, fill in the **Oval** to the right of your selection **completely**.

When you finish voting the ballot, seal it in the postage-paid return envelope. Please be sure to **SIGN** your name, date and write your Santa Clara County residence address on the envelope before returning your ballot.

You may return your ballot by mail or fax. If you wish to fax your ballot, complete and **sign the *Fax Cover Sheet*** instead of the return envelope. The fax number is 1-408-293-6002.

For more information about the election or to track the status of your ballot, please visit our website: **www.sccvote.org**

For your ballot to be counted, it MUST be returned by 8 p.m. on Election Day OR postmarked on or before Election Day and received no later than 17 days after Election Day.

FAX COVER SHEET
REQUIRED IF RETURNING YOUR BALLOT BY FAX
Remove this page, sign, and fax along with your completed ballot.
FAX: 1-408-293-6002



OATH OF VOTER

I, acknowledge that by returning my voted ballot by facsimile transmission I have waived my right to have my ballot kept secret. Nevertheless, I understand that, as with any vote by mail voter, my signature, whether on this oath of voter form or my identification envelope, will be permanently separated from my voted ballot to maintain its secrecy at the outset of the tabulation process and thereafter.

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Last Name

First Name

Middle Initial

My residence address (last U.S. residence for voter qualification purposes) is:

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Street Address

City

ZIP Code

My current mailing address is:

--	--	--

Street Address

City

ZIP Code

My e-mail address is

--

My fax number is

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I am a resident of _____ County, State of California, or am qualified as an elector pursuant to paragraph (2) of subdivision (b) of Section 321 of the Elections Code and I have not applied, nor intend to apply, for a vote by mail ballot from any other jurisdiction for the same election.

I declare under penalty of perjury under the laws of the State of California that the foregoing is true and correct.

X

Voter's Signature

Date

(Note: Power of attorney cannot be accepted)

YOUR BALLOT CANNOT BE COUNTED UNLESS YOU SIGN THE ABOVE OATH AND INCLUDE IT WITH YOUR BALLOT, ALL OF WHICH ARE RETURNED BY FACSIMILE TRANSMISSION.