John Arntz, Director

Ballot Return Form June 7, 2022, Consolidated Statewide Direct Primary Election

You must use this form if you are returning your voted ballot in your own envelopes. If you are using the official ballot return envelope, you do not need to use this form.

If you do not have the official return envelope, contact the Department by June 1 to request a replacement envelope. After that date, when it is too late to mail a replacement envelope, you can request the envelope at the City Hall Voting Center or use two plain envelopes and this form to return your ballot, following the instructions below.

Instructions for returning the ballot using two plain envelopes:

- 1. Place your ballot printout into a plain envelope, then seal the envelope.
- 2. Write "Official Ballot –To Be Opened Only by the San Francisco Department of Elections" on the front of the envelope.
- 3. Complete and sign this form and enclose it, along with your sealed ballot envelope, into a 2nd envelope.
 - a. To return your ballot by mail, add postage to the outer envelope, and mail it to:

San Francisco Department of Elections

1 Dr. Carlton B. Goodlett Place

City Hall, Ste. 48

San Francisco, CA 94102

For your ballot to be counted, the outer envelope must be postmarked by Election Day, June 7, 2022.

b. To return your ballot in person, visit any official ballot drop box, the City Hall Voting Center, or polling place (regular return deadlines apply).

1. Voter's Name and Address																													
Voter's Name (Your current first, middle and last names)																													
Vo	ter's	Regis	tered	Res	sident	tial A	ddres	s (W	here	you,	the	voter,	live	in Sa	an Fra	ancis	co. M	ilitary	y and	Ove	rseas	vote	rs m	nust p	rovid	e ado	dress	whe	re
they lived last in San Francisco.)																													
2	Doo	lara	ion	of V	otor																								
						£		46.0		:4la a u		da	.:41.	46		a i na a	. i.a .	د : مار،	h l a		4!				C:l	4	-4- 4	h a #a	!
																													in per intend
																								vice i				101	IIIGIIU
	r r · y	,		,	,			•	,	•	. ,												9						
C:~.	Nonetone of Materia											_	Dete																
Signature of Voter For your ballot to be counted, you must sign this form in your own handwriting. Your signature must compare to the one in your re													onie:	tration															
																								next t				cyis	uauon
					- ,			- -		, -			- 5	, -	- ,		- ,												
3.	Ball	ot R	etur	n Au	ıthor	izati	on (d	com	plet	e this	s se	ctior	onl	y if	som	eone	els	e wi	II be	retu	rnin	g yo	ur b	allot)				
Nam	ne of	Perso	on Au	ıthori	zed t	o Re	turn E	Ballot																					
Rela	tions	hip o	f Aut	noriz	ed Pe	erson	to V	oter				1			1	1						l	ı					l	
		[
	1				1			l				ı		1				1	1			l	l					l	
															_														
Signature of Person Authorized to Return Ballot													Date																
English (415) 554-4375 sfelect											tions	s Or									ı Ż	1/11/	5) 59	54_/	367				
Cay (445) 554 7244										4 D.	- 0				Sodiett Diese							中文 (415) 554-4367							