John Arntz, Director

Ballot Return Form

September 14, 2021, California Gubernatorial Recall 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 September 8 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, September 14, 2021.

b. To return your ballot in person, visit any drop-off station or polling place (regular return deadlines apply).

			` •				,			
1. Voter's Name and Address										
Voter's Name (Your current first, middle and last names)										
Voter's Registered Residential Address (Where you, the vote they lived last in San Francisco.)	er, live in Sa	n Francisco.	Military and	l Oversea	s voters	must p	rovide	addre	ess who	ere
2. Declaration of Voter										
I declare under penalty of perjury that I either reside California Elections Code §321(b); that I am the voter to apply, for a vote-by-mail ballot from any other jurisd	whose nam	ie appears (on this for	m; and t	hat I ha	ve ne	ither a	applie		
Signature of Voter For your ballot to be counted, you must sign this form in y record. Power of Attorney is not acceptable. If you cannot		ndwriting. Y								stration
3. Ballot Return Authorization (complete this section	on only if s	someone el	se will be	returnir	ıg your	ballo	t)			
Name of Person Authorized to Return Ballot										
Relationship of Authorized Person to Voter				1		-		1		
Signature of Person Authorized to Return Ballot			Date							