www.SBCountyElections.com



By Fax:

By E-mail:

(909) 386-8388

Elections Office of the Registrar of Voters

Mail Ballot Application

1. Fill Out Your Personal Information					
Name: Date of Birth: Last Name First Name				Date of Birth:	
Residence Address:					
Address to Mail Your Ballot to:					
E-mail Address:					
2. Select Any That Apply					
	 I want to be a Permanent Mail Ballot voter and receive my ballot by mail for ALL elections. I would like a Mail Ballot ONLY for the June 7, 2016 Presidential Primary Election. Application MUST be received by the Elections Office by Tuesday, May 31, 2016. Note to Nonpartisan Voters: For the Presidential Primary Election only, you have the option to request one of the following ballots. Select only ONE: 				
	☐ Nonpartisan Ba	llot	☐ Den	nocratic Ballot	
	☐ American Indep	endent Ballot	☐ Libe	rtarian Ballot	
3. Sign and Date Your Application					
I certify under Penalty of Perjury under the laws of the State of California that the information I have provided is true and correct.					
Sigi	gnature: Date:				
4. Return Your Application					
Ву	By Mail or In Person: San Bernardino County Elections Office 777 E. Rialto Avenue, San Bernardino, CA 92415				

Scan your application and e-mail it to mailballots@sbcountyelections.com