

## APPENDIX 2. CURE FORM- SIGNATURE DOES NOT MATCH

Dear [REGISTRANT\_FULL\_NAME],

### **We want to make sure we count your vote. Take action!**

We received your ballot for the [Election Name] Election. However, the signature on your return envelope does not match closely enough with the signature we have on your voter registration record.

To resolve this issue, complete the form included with this letter. The form you fill out must:

- include a signature that matches the signature on your returned ballot envelope, OR
- confirm that the ballot is yours by providing another proof of your identity, which can include one of the following:
  1. The last four digits of your Social Security number
  2. Your full Washington state driver's license number, driver's permit number or state identity card number
  3. Any of the alternate forms of identification listed. Provide a copy of **one** of the following:
    - valid photo identification
    - valid enrollment card of a federally recognized Indian tribe in Washington state;
    - copy of a current utility bill or current bank statement;
    - copy of a current government check;
    - copy of a current paycheck, or a government document (other than a voter registration card) showing the voter's name AND address.

**Please complete and return the signature resolution form included no later than 4:30 p.m. Pacific Time, [day before certification].** Please sign the form as close as possible to the way you signed your ballot envelope to resolve the issue.

You can check the status of your ballot at [www.VoteWA.gov](http://www.VoteWA.gov). Please allow 3-5 business days for processing.

If you have questions about this letter, please contact Douglas County Elections at 509-888-6403.

Sincerely,  
Douglas County Elections

**1. Read the ballot declaration**

**Ballot declaration**

I do solemnly swear or affirm under penalty of perjury that I am: A United States citizen; A Washington state resident that meets the requirements for voting mandated by state law; At least 18 years old on election day, or 17 years old at the primary and 18 years old by the day of the November general election; Voting only once in this election and not voting in any other United States jurisdiction; Not serving a sentence of total confinement under the jurisdiction of the Department of Corrections for a Washington felony conviction or currently incarcerated for a federal or out-of-state felony conviction; Not disqualified from voting due to a court order; and Aware it is illegal to forge a signature or cast another person's ballot and that attempting to vote when not qualified, attempting to vote more than once, or falsely signing this declaration is a felony punishable by a maximum imprisonment of five years, a maximum fine of \$10,000, or both.

**Voter oath**

I declare that the facts on this voter registration form are true. I am a citizen of the United States, I am a Washington state resident, and I am at least sixteen years old. I am not disqualified from voting due to a court order, and I am not currently serving a sentence of total confinement under the jurisdiction of the department of corrections for a Washington felony conviction, and I am not currently incarcerated for a federal or out-of-state felony conviction.

**2a. Sign and date below (required)**

By signing below or by providing another form of ID and returning this document you are confirming that you were the one who voted the ballot. All signatures below will be added to your voter registration record. Providing different versions of your signature can help avoid a similar issue in the future.

X \_\_\_\_\_ Today's Date \_\_\_\_/\_\_\_\_/\_\_\_\_

X \_\_\_\_\_ Today's Date \_\_\_\_/\_\_\_\_/\_\_\_\_

X \_\_\_\_\_ Today's Date \_\_\_\_/\_\_\_\_/\_\_\_\_

If you are unable to write your signature, make a mark in the signature area above. Have your mark witnessed and signed by two people below. You may not use power of attorney to sign for someone else.

\_\_\_\_\_ signature of witness 1      \_\_\_\_\_ signature of witness 2

**2b. or provide another way to verify your identity:**

Driver's license, driver's permit, or state ID number: \_\_\_\_\_

Last 4 of SSN: \_\_\_\_\_

See next side. [BALLOT\_ID]

### 3. Provide your contact information (optional)

Please provide us with your contact information. This information is not public and would only be used by our office to contact you with questions about your voter registration or ballot.

Email: \_\_\_\_\_ Phone: \_\_\_\_\_

\_\_\_\_\_ I would like to receive text and email notifications about my ballot status in future elections.

### 4. Return this form so we can count your ballot

We must receive this completed form before the deadline to count your ballot. Here is how you can return it:

1. Email to [elections@co.douglas.wa.us](mailto:elections@co.douglas.wa.us) – take a clear photo or scan of the entire form.
2. Mail with the included return envelope – no stamp needed.
3. In person at Douglas County Elections – 213 S Rainier St, Waterville, WA.
4. Fax to (509) 745-8931.

We must receive this form **by 4:30 p.m. on [Day Before Certification]** to count your ballot.

