

SIGNATURE CURE AFFIDAVIT FOR VOTE-BY-MAIL BALLOT

(The affidavit is for use by a voter who returns a vote-by-mail ballot with a signature issue on their Voter's Certificate.)

1. INSTRUCTIONS

Use the following checklist to complete and return this form to the Jackson County Supervisor of Elections Office no later than 5 p.m. on the Monday before the election.

Complete and sign the affidavit below; AND

Include a copy of one of the following forms of identification (ID) that shows your name and photograph:

Identification that includes your name and photograph : Florida driver's license, Florida ID, United States passport, debit or credit card, military identification, student identification, retirement center identification, neighborhood association identification, public assistance identification, veteran health identification card issued by the United States Department of Veterans Affairs, a Florida license to carry a concealed weapon or firearm, or an employee identification card issued by any branch, department, agency, or entity of the Federal Government, the state, a county, or a municipality.

OR

Identification that shows your name and current residence address: current utility bill, bank statement, government check, paycheck, or government document (excluding voter information card).

Return this completed affidavit and the copy of your identification documents to the Supervisor of Elections no later than 5 p.m. on the Monday before the election.

- Deliver to our office (by you or another person) at 2851 Jefferson St, Marianna, FL 32448.
- Mail them to us at PO Box 6046, Marianna, FL 32447.
- Fax (850-482-9102) or email (email@jacksoncountysoe.org) to our office.

Contact us if you have any questions at 850-482-9652.

2. VOTE-BY-MAIL BALLOT AFFIDAVIT

I, _____ am a qualified voter in this election and registered voter of Jackson County,
(Print voter's name)

Florida. I do solemnly swear or affirm that: I requested and returned the vote-by-mail ballot and that I have not and will not vote more than one ballot in this election. I understand that if I commit or attempt any fraud in connection with voting, vote a fraudulent ballot, or vote more than once in an election, I may be convicted of a felony of the third degree and fined up to \$5,000 and imprisoned for up to 5 years. I understand that my failure to sign this affidavit means that my vote-by-mail ballot will be invalidated.

(Voter's Signature)

(Voter's Address)