



OMITTED SIGNATURE AFFIDAVIT FOR VOTE-BY-MAIL BALLOT

(The affidavit is for use by a voter who returns a vote-by-mail ballot
without signing the Voter's Certificate)

I. INSTRUCTIONS – *READ CAREFULLY TO HAVE YOUR VOTE-BY-MAIL BALLOT COUNT*

Complete and return this form as soon as possible so that it can reach the supervisor of elections of the county in which your precinct is located *no later than 5 p.m. on the day before the election*. Use the following as a checklist – you must:

- Complete and sign the affidavit below - sign on the line above (Voter's Signature); **AND**.
- Include a copy of one of the following forms of identification (ID):
 - a. *ID that includes your name and photograph*: United States passport, debit or credit card, or military, student, retirement center, neighborhood association, or public assistance ID, veteran health ID card issued by U.S. Department of Veterans Affairs, a Florida license to carry a concealed weapon or firearm, or an employee ID card issued by any branch, department, agency, or entity of the Federal Government, the state, a county, or a municipality; **or**
 - b. *ID that shows your name and current residence address*: current utility bill, bank statement, government check, paycheck, or government document (excluding voter ID card); **AND**
- Return the completed affidavit and the copy of your ID to your county supervisor of elections by one of the following means:
 - Deliver in person or by someone else; or
 - Mail [Insert the completed affidavit and ID into a mailing envelope and address to the supervisor. Be sure there is sufficient postage and the supervisor's address is correct]; or
 - Fax or email [Attach the completed affidavit and copy of the ID].

BY MAIL - Broward Supervisor of Elections, PO BOX 029026, Ft. Lauderdale, FL 33302-9026
FAX - Fax No. 954-321-0310 **EMAIL** - absenteeballot@browardsoe.org
IN PERSON - You may hand deliver these documents to the Broward County Supervisor of Elections Voting Equipment Center at: 1501 NW 40th Ave, Lauderhill, FL 33313 (Phone No. 954-357-7050)

II. VOTE-BY-MAIL BALLOT AFFIDAVIT

I, _____, am a qualified voter in this election and
(Print voter's name)
registered voter of _____ County, Florida. I do solemnly swear or affirm that
(Print name of county)

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.

(Signature of Voter)

(Address of Voter)