



Guide to Voter Registration

Shasta County Elections

Cathy Darling Allen

County Clerk/Registrar of Voters

1643 Market Street

Redding, CA 96001



Welcome!

Thank you for your interest in becoming a Deputy Registrar of Voters. We are happy to have every interested citizen promote voter registration, one of this country's most basic civic duties and the foundation of our governmental system. We hope you enjoy this presentation. It has been prepared to assist you through this process and is intended to provide general information.

While staff has attempted to be as informative as possible in compiling this information and we appreciate the opportunity to address your questions not answered in this presentation, the law prohibits employees from answering questions of a legal nature. This guide is not intended as a substitute for legal counsel.

RESPONSIBILITIES

**YOU are responsible
for the Voter Registration Cards
(VRCs) issued to you.**

Make sure that those who help with distribution understand the requirements and fully understand their responsibility. Encourage them to come into the Elections Office and view this information also.

What do you do with completed VRCs?

Do **NOT** hold on to completed cards

If you accept a completed Voter Registration Card, it must be mailed or delivered within three (3) working days or by the close of registration*, whichever comes first.

Deliver completed Voter Registration Cards to:

- The Elections Department
- The Secretary of State's Office

Or mail them to the Elections Department – VRCs are postage paid

*The close of registration is 15 days prior to each election. All VRCs must be either received by the Elections Department or postmarked on or before the close of registration to be eligible to vote.



Who is eligible to register to vote?

Citizens of the United States who are also:

- Residents of California
- 18 years old on or before election day
- Not in prison or on parole for a felony conviction

Who should complete a voter registration card?

Those who are eligible,

- and have never registered to vote in Shasta County.
- or wish to change their name, political party, and/or residence of their current registration.



Current Shasta County Voter Registration Card In circulation

All Voter Registration Cards must be accurate and complete.

Please read the instructions on the following slides carefully.

**CALIFORNIA VOTER REGISTRATION FORM
SHASTA COUNTY**

Fill out this form if you are a new voter, have moved or changed your name, or want to change your political party preference. You must be a U.S. citizen and at least 18 years old by the next election to use this form. Use blue or black ink. Print clearly.

Your legal name: First name _____ Middle name _____

① _____

Last name _____ ② _____

③ Mr. Mrs. Ms. Miss

Home address – not a P.O. Box or business address – (Number, Street, Ave., Drive, etc. Include N, S, E, W) _____ Apt or unit # _____

④ _____

City _____ State _____ Zip _____ California county _____

⑤ _____ **CA** _____

If you do not have a street address, describe where you live (Cross streets, Route, N, S, E, W) _____

⑥ _____

Mailing address – If different from above, or P.O. Box _____

⑦ _____

City _____ State _____ Zip _____ Foreign country _____

⑧ _____

Date of birth _____ U.S. state or foreign country of birth _____

⑨ _____ 1 9 _____ ⑩ _____

CA driver license or CA ID card # _____ If you do not have a CA driver license or ID card, list the last 4 numbers of your Social Security Number, if you have one. → SSN (Last 4 numbers) _____ Phone numbers are posted at polling places on election day.

⑪ _____

Email (optional) _____ Phone number (optional) _____

⑫ _____ ⑬ _____

⑭ Do you want to disclose a political party preference?

Yes, my political party preference is (check one):

American Independent Party Americans Elect Party Democratic Party
 Green Party Libertarian Party Peace and Freedom Party
 Republican Party Other (specify): _____

No, I do not want to disclose a political party preference.
(If you check this box, you may not be able to vote for some parties' candidates at a primary election for U.S. President or party committee.)

⑮ To receive a vote-by-mail ballot in all elections, initial here: _____

⑯ If you were registered to vote before, fill out below:

First name _____ Middle Initial _____ Last name _____

Previous address where you were registered _____ City _____

State _____ Zip _____ Previous county _____ Previous political party preference (if any) _____

⑰ Are you a U.S. citizen? _____ Yes No → **A "No" answer to either question means you CANNOT register to vote.**
 Will you be 18 or older by the next election? _____ Yes No

⑱ **Read and sign below.**
 I am a U.S. citizen and will be at least 18 years old on election day. I am not in prison, on parole, serving a state prison sentence in county jail, serving a sentence for a felony pursuant to subdivision (h) of Penal Code section 1170, or on post release community supervision. I understand that it is a crime to intentionally provide incorrect information on this form. I declare under penalty of perjury under the laws of the State of California that the information on this form is true and correct.

▶ _____

Voter Signature _____ Date Signed: _____ Month _____ Day _____ Year _____

45 ZB 240819 _____ 170001 _____

Important! To vote in the next election, you must mail or deliver this card at least 15 days before the next election. New voters who register by mail may have to show their ID at the polling place the first time they vote.

Optional

A. Check here if you can be a poll worker.
(If bilingual, indicate language.)
 Check here if you can provide a polling place on election day.

B. Your ethnicity/race: _____

C. Check your language preference: English Spanish Vietnamese Tagalog Japanese Chinese Korean Thai Vietnamese Khmer Hindi Vietnamese Khmer Hindi

Did someone help you fill out or deliver this form?
 If yes, the person who helped you must fill out and sign both parts of this green box.

Signature _____ Month _____ Day _____ Year _____
 Name, address, and tel.: _____

Box 1 & 2



Instruct voters to:

- Print complete name

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1 Your legal name: First name Middle name

2 Last name *Optional*
 Mr. Mrs. Ms. Miss

3 Home address -- not a P.O. Box or business address -- (Number, Street, Ave., Drive, etc. Include N, S, E, W) Apt or unit #

4 City State California county

5 City State Zip Foreign country

6 Date of birth U.S. state or foreign country of birth

7 CA driver license or CA ID card # If you do not have a CA driver license or ID card, list the last 4 numbers of your Social Security Number, if you have one. * - - - - SSN (Last 4 numbers) Phone numbers are posted at polling places on election day.

8 Email (optional) Phone number (optional)

9 Do you want to disclose a political party preference?
Yes, my political party preference is (check one):
 American Independent Party Americans Elect Party Democratic Party
 Green Party Libertarian Party Peace and Freedom Party
 Republican Party Other (specify):
 No, I do not want to disclose a political party preference.
(If you check this box, you may not be able to vote for some parties' candidates at a primary election for U.S. President or party committee.)

10 To receive a vote-by-mail ballot in all elections, initial here: _____

11 If you were registered to vote before, fill out below:
First name Middle initial Last name
Previous address where you were registered City
State Zip Previous county Previous political party preference (if any)

12 Are you a U.S. citizen? Yes No
Will you be 18 or older by the next election? Yes No **A "No" answer to either question means you CANNOT register to vote.**

13 Read and sign below.
I am a U.S. citizen and will be at least 18 years old on election day. I am not in prison, on parole, serving a state prison sentence in county jail, serving a sentence for a felony pursuant to subdivision (b) of Penal Code section 1170, or on post release community supervision. I understand that it is a crime to intentionally provide incorrect information on this form. I declare under penalty of perjury under the laws of the State of California that the information on this form is true and correct.

Voter Signature Date Signed: Month Day Year
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Optional
A. Check here if you can be a poll worker.
(If bilingual, indicate language: _____)
 Check here if you can provide a polling place on election day.
B. Your ethnicity/race: _____
C. Check your language preference: English Spanish
 Chinese Vietnamese Korean Tagalog Japanese
中文 Việt ngữ 한국어 日本語
 Hindi Khmer Thai
हिंदी ខ្មែរ ไทย

Did someone help you fill out or deliver this form?
If yes, the person who helped you must fill out and sign both parts of this green box.
Signature _____ Month Day Year
Name, address, and tel: _____

Box 4 & 5

Instruct voters to:

- Print residence address

This must be the physical address where they live in Shasta County. PO Boxes and business addresses are NOT accepted.

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SHASTA COUNTY

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1 Your legal name: First name Middle name

2 Last name Optional
 Mr. Mrs. Ms. Miss

3 Home address – not a P.O. Box or business address – (Number, Street, Ave., Drive, etc. Include N, S, E, W) Apt. or unit

4 City State Zip California county
CA

5 If you do not have a street address, use a P.O. Box (Circle streets, Route, N, S, E, W)

6 Mailing address – if different from above, or P.O. Box

7 City State Zip Foreign country

8 Date of birth U.S. state or foreign country of birth

9 CA driver license or CA ID card # If you do not have a CA driver license or ID card, list the last 4 numbers of your Social Security Number, if you have one. * → SSN (Last 4 numbers) Phone numbers are posted at polling places on election day.

10 Email (optional) Phone number (optional)

11 Do you want to disclose a political party preference?
Yes, my political party preference is (check one):
 American Independent Party Americans Elect Party Democratic Party
 Green Party Libertarian Party Peace and Freedom Party
 Republican Party Other (specify):
No, I do not want to disclose a political party preference.
(If you check this box, you may not be able to vote for some parties' candidates at a primary election for U.S. President or party committee.)

12 To receive a vote-by-mail ballot in all elections, initial here: _____

13 If you were registered to vote before, fill out below:
First name Middle initial Last name
Previous address where you were registered City
State Zip Previous county Previous political party preference (if any)

14 Are you a U.S. citizen? Yes No
Will you be 18 or older by the next election? Yes No → A "No" answer to either question means you CANNOT register to vote.

15 Read and sign below.
I am a U.S. citizen and will be at least 18 years old on election day. I am not in prison, on parole, serving a state prison sentence in county jail, serving a sentence for a felony pursuant to subdivision (b) of Penal Code section 1170, or on post release community supervision. I understand that it is a crime to intentionally provide incorrect information on this form. I declare under penalty of perjury under the laws of the State of California that the information on this form is true and correct.

16 Voter Signature Date Signed: Month Day Year
45 ZB 240819 170001

Important! To vote in the next election, you must mail or deliver this card at least 15 days before the next election. New voters who register by mail may have to show their ID at the polling place the first time they vote.

Optional
A. Check here if you can be a poll worker.
(If bilingual, indicate language: _____)
 Check here if you can provide a polling place on election day.
B. Your ethnicity/race: _____
C. Check your language preference: English Spanish
 Chinese Vietnamese Korean Tagalog Japanese
中文 Việt ngữ 한국어 Tagalog 日本語
 Hindi Khmer Thai
हिंदी Khmer ไทย

Did someone help you fill out or deliver this form?
If yes, the person who helped you must fill out and sign both parts of this green box.
Signature Month Day Year
Name, address, and tel: _____

Box 7 & 8

Instruct voters to:

- Print **mailing** address

Complete **only** if they wish to receive their election mail at a different address than where they live.

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SHASTA COUNTY

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Your legal name: First name _____ Middle name _____

① Last name _____ Optional
 Mr. Mrs. Ms. Miss

② Home address -- not a P.O. Box or business address -- (Number, Street, Ave., Drive, etc. Include N, S, E, W) _____ Apt or unit # _____

③ City _____ State **CA** Zip _____ California county _____

④ If you do not have a street address, describe where you live (Cross streets, Route, N, S, E, W) _____

⑤ Mailing address -- different from above, or P.O. Box _____
City _____ State _____ Zip _____ Foreign country _____

⑥ Date of birth _____ U.S. state or foreign country of birth _____

⑦ CA driver license or CA ID card # _____ If you do not have a CA driver license or ID card, list the last 4 numbers of your Social Security Number, if you have one. * - - - -> SSN (Last 4 numbers) _____ Phone numbers are posted at polling places on election day.

⑧ Email (optional) _____ Phone number (optional) _____

⑨ Do you want to disclose a political party preference?
Yes, my political party preference is (check one):
 American Independent Party Americans Elect Party Democratic Party
 Green Party Libertarian Party Peace and Freedom Party
 Republican Party Other (specify): _____
No, I do not want to disclose a political party preference.
(If you check this box, you may not be able to vote for some parties' candidates at a primary election for U.S. President or party committee.)

⑩ To receive a vote-by-mail ballot in all elections, initial here: _____

⑪ If you were registered to vote before, fill out below:
First name _____ Middle initial _____ Last name _____
Previous address where you were registered _____ City _____
State _____ Zip _____ Previous county _____ Previous political party preference (if any) _____

⑫ Are you a U.S. citizen? Yes No
Will you be 18 or older by the next election? Yes No **> A "No" answer to either question means you CANNOT register to vote.**

⑬ **Read and sign below.**
I am a U.S. citizen and will be at least 18 years old on election day. I am not in prison, on parole, serving a state prison sentence in county jail, serving a sentence for a felony pursuant to subdivision (b) of Penal Code section 1170, or on post release community supervision. I understand that it is a crime to intentionally provide incorrect information on this form. I declare under penalty of perjury under the laws of the State of California that the information on this form is true and correct.

▶ **Signature:** _____ **Date Signed:** Month / Day / Year
45 ZB 240819 170001

Important! To vote in the next election, you must mail or deliver this card at least 15 days before the next election. New voters who register by mail may have to show their ID at the polling place the first time they vote.

Optional
A. Check here if you can be a poll worker.
If bilingual, indicate language: _____
 Check here if you can provide a polling place on election day.
B. Your ethnicity/race: _____
C. Check your language preference: English Spanish
 Chinese Vietnamese Korean Tagalog Japanese
中文 Việt ngữ 한국어 일본어
 Hindi Khmer Thai
हिंदी ខ្មែរ ไทย

Did someone help you fill out or deliver this form?
If yes, the person who helped you must fill out and sign both parts of this green box.
Signature _____ Month / Day / Year
Name, address, and tel: _____

Box 9

Instruct voters to:

- Print date of birth

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SHASTA COUNTY

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1 Your legal name: First name Middle name

2 Last name *Optional*
 Mr. Mrs. Ms. Miss

3 Home address - not a P.O. Box or business address - (Number, Street, Ave., Drive, etc. Include N, S, E, W) Apt or unit #

4 City State Zip California county
C A

5 If you do not have a street address, describe where you live (Cross streets, Route, N, S, E, W)

6 Mailing address - If different from above, or P.O. Box

7 City State Zip Foreign country

8 Date of birth U.S. state or foreign country of birth

9 Driver license or CA ID card # SSN (Last 4 numbers) Phone numbers are posted at polling places on election day.

10 Email (optional) Phone number (optional)

11 Do you want to disclose a political party preference?
Yes, my political party preference is (check one):
 American Independent Party Americans Elect Party Democratic Party
 Green Party Libertarian Party Peace and Freedom Party
 Republican Party Other (specify):
No, I do not want to disclose a political party preference.
(If you check this box, you may not be able to vote for some parties' candidates at a primary election for U.S. President or party committee.)

12 To receive a vote-by-mail ballot in all elections, initial here: _____

13 If you were registered to vote before, fill out below:
First name Middle initial Last name
Previous address where you were registered City
State Zip Previous county Previous political party preference (if any)

14 Are you a U.S. citizen? Yes No
Will you be 18 or older by the next election? Yes No **A "No" answer to either question means you CANNOT register to vote.**

15 Read and sign below.
I am a U.S. citizen and will be at least 18 years old on election day. I am not in prison, on parole, serving a state prison sentence in county jail, serving a sentence for a felony pursuant to subdivision (h) of Penal Code section 1170, or on post release community supervision. I understand that it is a crime to intentionally provide incorrect information on this form. I declare under penalty of perjury under the laws of the State of California that the information on this form is true and correct.

16 Voter Signature Date Signed: Month Day Year
45 ZB 240819 170001

17 **Important!** To vote in the next election, you must mail or deliver this card at least 15 days before the next election. New voters who register by mail may have to show their ID at the polling place the first time they vote.

Optional
A. Check here if you can be a poll worker.
If bilingual, indicate language: _____
 Check here if you can provide a polling place on election day.
B. Your ethnicity/race: _____
C. Check your language preference: English Spanish
 Chinese Vietnamese Korean Tagalog Japanese
中文 Việt ngữ 한국어 日本語
 Hindi Khmer Thai
हिंदी ខ្មែរ ไทย

18 Did someone help you fill out or deliver this form?
If yes, the person who helped you must fill out and sign both parts of this green box.
Signature _____ Month Day Year
Name, address, and tel: _____

Box 10

Instruct voters to:

- Print place of birth

List the name of the *state* in the United States or the name of the *foreign country* if born outside the United States.

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Your legal name: First name _____ Middle name _____

① Last name _____ Optional
 Mr. Mrs. Ms. Miss

② Home address – not a P.O. Box or business address – (Number, Street, Ave., Drive, etc. Include N, S, E, W) _____ Apt or unit # _____

④ City _____ State **CA** Zip _____ California county _____

⑤ If you do not have a street address, describe where you live (Cross streets, Route, N, S, E, W) _____

⑥ Mailing address – if different from above, or P.O. Box _____

⑦ City _____ State _____ Zip _____ Foreign country _____

⑧ Date of birth _____ U.S. state or foreign country of birth **10** _____

⑨ CA driver license or CA ID card # _____ SSN (Last 4 numbers) _____ Phone numbers are posted at polling places on election day.

⑪ Email (optional) _____ Phone number (optional) _____

⑫ Do you want to disclose a political party preference?
Yes, my political party preference is (check one):
 American Independent Party Americans Elect Party Democratic Party
 Green Party Libertarian Party Peace and Freedom Party
 Republican Party Other (specify): _____
 No, I do not want to disclose a political party preference.
(If you check this box, you may not be able to vote for some parties' candidates at a primary election for U.S. President or party committee.)

⑬ To receive a vote-by-mail ballot in all elections, initial here: _____

⑭ If you were registered to vote before, fill out below:
First name _____ Middle initial _____ Last name _____
Previous address where you were registered _____ City _____
State _____ Zip _____ Previous county _____ Previous political party preference (if any) _____

⑮ Are you a U.S. citizen? Yes No
Will you be 18 or older by the next election? Yes No **A "No" answer to either question means you CANNOT register to vote.**

⑯ Read and sign below.
I am a U.S. citizen and will be at least 18 years old on election day. I am not in prison, on parole, serving a state prison sentence in county jail, serving a sentence for a felony pursuant to subdivision (h) of Penal Code section 1170, or on post release community supervision. I understand that it is a crime to intentionally provide incorrect information on this form. I declare under penalty of perjury under the laws of the State of California that the information on this form is true and correct.

Voter Signature _____ Date Signed: Month Day Year
45 ZB 240819 170001

Important! To vote in the next election, you must mail or deliver this card at least 15 days before the next election. New voters who register by mail may have to show their ID at the polling place the first time they vote.

Optional
A. Check here if you can be a poll worker.
(If bilingual, indicate language: _____)
 Check here if you can provide a polling place on election day.
B. Your ethnicity/race: _____
C. Check your language preference: English Spanish
 Chinese Vietnamese Korean Tagalog Japanese
中文 Việt ngữ 한국어 Tagalog 日本語
 Hindi Khmer Thai
हिंदी Khmer ไทย

Did someone help you fill out or deliver this form?
If yes, the person who helped you must fill out and sign both parts of this green box.
Signature _____ Month Day Year
Name, address, and tel: _____

Box 11

Instruct voters to:

- Print CA Driver's License or Identification Card #

If they have been issued a California Drivers License or a Identification Card, they **MUST** provide the number.

If they do not have either, they **MUST** list the last 4 digits of their Social Security Number.

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1 Your legal name: First name Middle name

2 Last name Optional
 Mr. Mrs. Ms. Miss

3 Home address -- not a P.O. Box or business address -- (Number, Street, Ave., Drive, etc. Include N, S, E, W) Apt or unit #

4 City State Zip California county
C A

5 If you do not have a street address, describe where you live (Cross streets, Route, N, S, E, W)

6 Mailing address -- if different from above, or P.O. Box

7 City State Zip Foreign country

8 Date of birth U.S. state or foreign country of birth

9 CA driver license or CA ID card # (If you do not have a CA driver license or ID card, list the last 4 numbers of your Social Security Number, if you have one.) SSN (Last 4 numbers) Phone numbers are posted at polling places on election day.

10 Email (optional) Phone number (optional)

11 Do you want to disclose a political party preference?
Yes, my political party preference is (check one):
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 Republican Party Other (specify):
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Will you be 18 or older by the next election? Yes No **A "No" answer to either question means you CANNOT register to vote.**

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(If bilingual, indicate language: _____)
 Check here if you can provide a polling place on election day.
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19 Did someone help you fill out or deliver this form?
If yes, the person who helped you must fill out and sign both parts of this green box.
Signature _____ Month Day Year
Name, address, and tel: _____

Confidential Voter Information

Voter Information is Confidential:

Is not available to the general public at the county elections official's office. E.C. 2194

Certain Information may be given to:

Qualified organizations for political purposes only. E.C. 2194

The California Drivers License or ID number, Social Security number or any unique identifier used by the State of California for voter identification are confidential and are not to be disclosed to any person. E.C. 2194

Box 12 & 13

Instruct voters to:

- Print telephone number and e-mail address

The telephone number and email address are optional, but they are helpful when the Elections Department needs to contact the voter.

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Your legal name: First name Middle name

① Last name

② Home address – not a P.O. Box or business address – (Number, Street, Ave., Drive, etc. Include N, S, E, W) Apt or unit #

④ City State Zip California county

⑤ If you do not have a street address, describe where you live (Cross streets, Route, N, S, E, W)

⑥ Mailing address – if different from above, or P.O. Box

⑦ City State Zip Foreign country

⑧ Date of birth U.S. state or foreign country of birth

⑨ CA driver license or CA ID card # If you do not have a CA driver license or ID card, list the SSN (Last 4 numbers) Phone numbers are posted at last 4 numbers of your Social Security Number, if you have one.

⑩

⑪ Email (optional) Phone number (optional)

⑫

⑬

⑭ Do you want to disclose a political party preference?

Yes, my political party preference is (check one):
 American Independent Party Americans Elect Party Democratic Party
 Green Party Libertarian Party Peace and Freedom Party
 Republican Party Other (specify):

No, I do not want to disclose a political party preference. (If you check this box, you may not be able to vote for some parties' candidates at a primary election for U.S. President or party committee.)

⑮ To receive a vote-by-mail ballot in all elections, initial here: _____

⑯ If you were registered to vote before, fill out below:

First name Middle initial Last name

Previous address where you were registered City

State Zip Previous county Previous political party preference (if any)

⑰ Are you a U.S. citizen? Yes No Will you be 18 or older by the next election? Yes No **➤ A "No" answer to either question means you CANNOT register to vote.**

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45 ZB 240819 170001

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Optional

A. Check here if you can be a poll worker. (If bilingual, indicate language: _____)

Check here if you can provide a polling place on election day.

B. Your ethnicity/race: _____

C. Check your language preference: English Spanish Vietnamese Korean Tagalog Japanese Chinese Vietnamese Korean Tagalog Japanese 中文 Việt ngữ 한국어 Tagalog 日本語 Hindi Khmer Thai 印地 ខ្មែរ 泰语

Did someone help you fill out or deliver this form?

If yes, the person who helped you must fill out and sign both parts of this green box.

Signature Month Day Year

Name, address, and tel: _____

Box 14

Instruct voters to:

- Check the appropriate box

Voters do NOT have to choose any of the parties listed. If they don't want to affiliate with a party, they can select "NO." If "Other" is marked, they must fill in the name of the party desired.

CALIFORNIA VOTER REGISTRATION FORM
SHASTA COUNTY

Fill out this form if you are a new voter, have moved or changed your name, or want to change your political party preference. You must be a U.S. citizen and at least 18 years old by the next election to use this form. Use blue or black ink. Print clearly.

1 Your legal name: First name Middle name

2 Last name Optional
 Mr. Mrs. Ms. Miss

3 Home address - not a P.O. Box or business address - (Number, Street, Ave., Drive, etc. Include N, S, E, W) Apt or unit #

4 City State Zip California county
CA

5 If you do not have a street address, describe where you live (Cross streets, Route, N, S, E, W)

6 Mailing address - if different from above, or P.O. Box

7 City State Zip Foreign country

8 Date of birth U.S. state or foreign country of birth

9 CA driver license or CA ID card # If you do not have a CA driver license or ID card, list the last 4 numbers of your Social Security Number, if you have one. SSN (Last 4 numbers) Phone numbers are posted at polling places on election day.

10 Email (optional) Phone number (optional)

11 Do you want to disclose your political party preference?
 Yes, my political party preference is (check one):
 American Independent Party Democrats Elect Party
 Green Party Libertarian Party Peace and Freedom Party
 Republican Party Other (specify):
 No, I do not want to disclose a political party preference.
(If you check this box, you may not be able to vote for some parties' candidates at a primary election for U.S. President or party committee.)

12 To receive a vote-by-mail ballot in an election, you must be registered to vote.

13 If you were registered to vote before, fill out below:

14 First name Middle initial Last name

15 Previous address where you were registered City

16 State Zip Previous county Previous political party preference (if any)

17 Are you a U.S. citizen? Yes No
Will you be 18 or older by the next election? Yes No **A "No" answer to either question means you CANNOT register to vote.**

18 Read and sign below.
I am a U.S. citizen and will be at least 18 years old on election day. I am not in prison, on parole, serving a state prison sentence in county jail, serving a sentence for a felony pursuant to subdivision (b) of Penal Code section 1170, or on post release community supervision. I understand that it is a crime to intentionally provide incorrect information on this form. I declare under penalty of perjury under the laws of the State of California that the information on this form is true and correct.

19 Voter Signature Date Signed: Month Day Year
45 ZB 240819 170001

Important! To vote in the next election, you must mail or deliver this card at least 15 days before the next election. New voters who register by mail may have to show their ID at the polling place the first time they vote.

Optional

A. Check here if you can be a poll worker.
If bilingual, indicate language: _____

Check here if you can provide a polling place on election day.

B. Your ethnicity/race: _____

C. Check your language preference: English Spanish
 Chinese Vietnamese Korean Tagalog Japanese
中文 Việt ngữ 한국어 일본어
 Hindi Khmer Thai
हिंदी ខ្មែរ ไทย

Did someone help you fill out or deliver this form?
If yes, the person who helped you must fill out and sign both parts of this green box.

Signature _____ Month Day Year
Name, address, and tel: _____

Box 15

Instruct voters to:

- Write their initials on the line provided if they want to be a Permanent Vote-by-Mail voter

CALIFORNIA VOTER REGISTRATION FORM
SHASTA COUNTY

Fill out this form if you are a new voter, have moved or changed your name, or want to change your political party preference. You must be a U.S. citizen and at least 18 years old by the next election to use this form. Use blue or black ink. Print clearly.

Your legal name: First name _____ Middle name _____

① Last name _____ Optional
③ Mr. Mrs. Ms. Miss

④ Home address – not a P.O. Box or business address – (Number, Street, Ave., Drive, etc. Include N, S, E, W) _____ Apt or unit # _____

⑤ City _____ State **CA** Zip _____ California county _____

⑥ If you do not have a street address, describe where you live (Cross streets, Route, N, S, E, W) _____

⑦ Mailing address – if different from above, or P.O. Box _____

⑧ City _____ State _____ Zip _____ Foreign country _____

⑨ Date of birth _____ U.S. state or foreign country of birth _____

⑩ CA driver license or CA ID card # _____ If you do not have a CA driver license or ID card, list the last 4 numbers of your Social Security Number, if you have one. * - - - -> SSN (Last 4 numbers) _____ Phone numbers are posted at polling places on election day.

⑪ Email (optional) _____ Phone number (optional) _____

⑫

⑬

⑭ Do you want to disclose a political party preference?
Yes, my political party preference is (check one):
 American Independent Party Democratic Party
 Libertarian Party Peace and Justice Party
 Republican Party Other (specify): _____
 No, I do not want to disclose a political party preference.
(If you check this box, you may not be able to vote for some parties' candidates at a primary election for U.S. President or party committee.)

⑮ To receive a vote-by-mail ballot in all elections, initial here: _____

⑯ If you were registered to vote before, fill out below:
First name _____ Middle initial _____ Last name _____
Previous address where you were registered _____ City _____
State _____ Zip _____ Previous county _____ Previous political party preference (if any) _____

⑰ Are you a U.S. citizen? Yes No
Will you be 18 or older by the next election? Yes No **A "No" answer to either question means you CANNOT register to vote.**

⑱ **Read and sign below.**
I am a U.S. citizen and will be at least 18 years old on election day. I am not in prison, on parole, serving a state prison sentence in county jail, serving a sentence for a felony pursuant to subdivision (b) of Penal Code section 1170, or on post release community supervision. I understand that it is a crime to intentionally provide incorrect information on this form. I declare under penalty of perjury under the laws of the State of California that the information on this form is true and correct.

Voter Signature _____ Date Signed: Month Day Year
45 ZB 240819 170001

Important! To vote in the next election, you must mail or deliver this card at least 15 days before the next election. New voters who register by mail may have to show their ID at the polling place the first time they vote.

Optional
A. Check here if you can be a poll worker.
(If bilingual, indicate language: _____)
 Check here if you can provide a polling place on election day.
B. Your ethnicity/race: _____
C. Check your language preference: English Spanish Vietnamese Tagalog Japanese Chinese Vietnamese Korean Tagalog Japanese
中文 Việt ngữ 한국어 日本語
 Hindi Khmer Thai Thai
हिंदी ខ្មែរ ไทย

Did someone help you fill out or deliver this form?
If yes, the person who helped you must fill out and sign both parts of this green box.
Signature _____ Month Day Year
Name, address, and tel: _____

Box 16

Instruct voters to:

- Are you registered to vote in another state or county?
- **YES** - complete prior registration information section
- **NO** - leave blank and continue

If the voter does not remember the complete address, have them complete as much as possible.

CALIFORNIA VOTER REGISTRATION FORM
SHASTA COUNTY

Fill out this form if you are a new voter, have moved or changed your name, or want to change your political party preference. You must be a U.S. citizen and at least 18 years old by the next election to use this form. Use blue or black ink. Print clearly.

1 Your legal name: First name Middle name

2 Last name Optional
 Mr. Mrs. Ms. Miss

3 Home address - not a P.O. Box or business address - (Number, Street, Ave., Drive, etc. Include N, S, E, W) Apt or unit #

4 City State Zip California county
C A

5 If you do not have a street address, describe where you live (Cross streets, Route, N, S, E, W)

6 Mailing address - if different from above, or P.O. Box

7 City State Zip Foreign country

8 Date of birth U.S. state or foreign country of birth

9 CA driver license or CA ID card # If you do not have a CA driver license or ID card, list the last 4 numbers of your Social Security Number, if you have one. * - - - -> SSN (Last 4 numbers) Phone numbers are posted at polling places on election day.

10 Email (optional) Phone number (optional)

11 Do you want to disclose a political party preference?
Yes, my political party preference is (check one):
 American Independent Party Democratic Party
 Green Party Libertarian Party Peace and Freedom Party
 Republican Party Other (specify):
No, I do not want to disclose a political party preference.
(If you check this box, you may not be able to vote for some parties' candidates at a primary election for U.S. President or party committee.)

12 To receive a vote-by-mail ballot in all states, answer here:

13 If you were registered to vote before, fill out below:

14 Previous name Middle Initial Last name
Previous address where you were registered City
State Zip Previous county Previous political party preference (if any)

15 Are you a U.S. citizen? Yes No
Will you be 18 or older by the next election? Yes No **A "No" answer to either question means you CANNOT register to vote.**

16 Read and sign below.
I am a U.S. citizen and will be at least 18 years old on election day. I am not in prison, on parole, serving a state prison sentence in county jail, serving a sentence for a felony pursuant to subdivision (b) of Penal Code section 1170, or on post release community supervision. I understand that it is a crime to intentionally provide incorrect information on this form. I declare under penalty of perjury under the laws of the State of California that the information on this form is true and correct.

17 Voter Signature Date Signed: Month Day Year
45 ZB 240819 170001

18 Important! To vote in the next election, you must mail or deliver this card at least 15 days before the next election. New voters who register by mail may have to show their ID at the polling place the first time they vote.

19 Did someone help you fill out or deliver this form?
If yes, the person who helped you must fill out and sign both parts of this green box.
Signature Month Day Year
Name, address, and tel: _____

Optional
A. Check here if you can be a poll worker.
If bilingual, indicate language: _____
 Check here if you can provide a polling place on election day.
B. Your ethnicity/race: _____
C. Check your language preference: English Spanish
 Chinese Vietnamese Korean Tagalog Japanese
中文 Việt ngữ 한국어 日本語
 Hindi Khmer Thai
हिंदी ខ្មែរ ไทย

Box 17 & 18

Instruct voters to:

- Check the appropriate boxes
- Sign and date the VRC

CALIFORNIA VOTER REGISTRATION FORM
SHASTA COUNTY

Fill out this form if you are a new voter, have moved or changed your name, or want to change your political party preference. You must be a U.S. citizen and at least 18 years old by the next election to use this form. Use blue or black ink. Print clearly.

Your legal name: First name _____ Middle name _____

① Last name _____ Optional
 Mr. Mrs. Ms. Miss

② Home address – not a P.O. Box or business address – (Number, Street, Ave., Drive, etc. Include N, S, E, W) _____ Apt or unit # _____

④ City _____ State **CA** Zip _____ California county _____

⑤ If you do not have a street address, describe where you live (Cross streets, Route, N, S, E, W) _____

⑥ Mailing address – if different from above, or P.O. Box _____

⑦ City _____ State _____ Zip _____ Foreign country _____

⑧ Date of birth _____ U.S. state or foreign country of birth _____

⑨ CA driver license or CA ID card # _____ If you do not have a CA driver license or ID card, list the last 4 numbers of your Social Security Number, if you have one. * → _____ SSN (Last 4 numbers) _____ Phone numbers are posted at polling places on election day.

⑪ Email (optional) _____ Phone number (optional) _____

⑫ Do you want to disclose a political party preference?
Yes, my political party preference is (check one):
 American Independent Party Americans Elect Party Democratic Party
 Green Party Libertarian Party Peace and Freedom Party
 Republican Party Other (specify): _____
No, I do not want to disclose a political party preference.
(If you check this box, you may not be able to vote for some parties' candidates at a primary election for U.S. President or party committee.)

⑬ To receive a vote-by-mail ballot in all elections, initial here: _____

⑭ If you were registered to vote before, fill out below:
First name _____ Middle initial _____ Last name _____
Previous address where you were registered _____ City _____
State _____ Zip _____ Previous county _____ Previous political party preference (if any) _____

⑮ Are you a U.S. citizen? Yes No
Will you be 18 or older by the next election? Yes No → **A "No" answer to either question means you CANNOT register to vote.**

⑯ **Read and sign below.**
I am a U.S. citizen and will be at least 18 years old on election day. I am not in prison, on parole, serving a state prison sentence in county jail, serving a sentence for a felony pursuant to subdivision (h) of Penal Code section 1170, or on post release community supervision. I understand that it is a crime to intentionally provide incorrect information on this form. I declare under penalty of perjury under the laws of the State of California that the information on this form is true and correct.

Optional
A. Check here if you can be a poll worker.
If bilingual, indicate language: _____
 Check here if you can provide a polling place on election day.
B. Your ethnicity/race: _____
C. Check your language preference: English Spanish
 Vietnamese Korean Tagalog Japanese
中文 Việt ngữ 한국어 日本語
 Hindi Khmer Thai
हिंदी ភ្នំ ไทย

Voter Signature _____ Date Signed: Month Day Year
45 ZB 240819 170001

Important! To vote in the next election, you must mail or deliver this card at least 15 days before the next election. New voters who register by mail may have to show their ID at the polling place the first time they vote.

Did someone help you fill out or deliver this form?
If yes, the person who helped you must fill out and sign both parts of this green box.
Signature _____ Month Day Year
Name, address, and tel: _____

WARNING

If a person

is **NOT** a citizen,

it is a

felony offense

to register to vote.

CALIFORNIA VOTER REGISTRATION FORM
SHASTA COUNTY

Fill out this form if you are a new voter, have moved or changed your name, or want to change your political party preference. You must be a U.S. citizen and at least 18 years old by the next election to use this form. Use blue or black ink. Print clearly.

1 Your legal name: First name Middle name

2 Last name *Optional*
 Mr. Mrs. Ms. Miss

3 Home address -- not a P.O. Box or business address -- (Number, Street, Ave., Drive, etc. Include N, S, E, W) Apt or unit #

4 City State Zip California county
C A

5 If you do not have a street address, describe where you live (Cross streets, Route, N, S, E, W)

6 Mailing address -- If different from above, or P.O. Box

7 City State Zip Foreign country

8 Date of birth U.S. state or foreign country of birth

9 CA driver license or CA ID card # If you do not have a CA driver license or ID card, list the last 4 numbers of your Social Security Number, if you have one. * - - - -> SSN (Last 4 numbers) Phone numbers are posted at polling places on election day.

10 Email (optional) Phone number (optional)

11 Do you want to disclose a political party preference?
Yes, my political party preference is (check one):
 American Independent Party Americans Elect Party Democratic Party
 Green Party Libertarian Party Peace and Freedom Party
 Republican Party Other (specify):
 No, I do not want to disclose a political party preference.
(If you check this box, you may not be able to vote for some parties' candidates at a primary election for U.S. President or party committee.)

12 To receive a vote-by-mail ballot in all elections, initial here: _____

13 If you were registered to vote before, fill out below:
First name Middle initial Last name
Previous address where you were registered City
State Zip Previous county Previous political party preference (if any)

14 Are you a U.S. citizen? Yes No
Will you be 18 or older by the next election? Yes No **A "No" answer to either question means you CANNOT register to vote.**

15 Read and sign below.
I am a U.S. citizen and will be at least 18 years old on election day. I am not in prison, on parole, serving a state prison sentence in county jail, serving a sentence for a felony pursuant to subdivision (b) of Penal Code section 1170, or on post release community supervision. I understand that it is a crime to intentionally provide incorrect information on this form. I declare under penalty of perjury under the laws of the State of California that the information on this form is true and correct.

Optional
A. Check here if you change a poll worker.
(If bilingual, indicate language: _____)
 Check here if you provide a polling place on election day.
B. Your ethnicity/race:
C. Check your language preference: English Spanish
 Chinese Vietnamese Korean Tagalog Japanese
中文 Việt ngữ 한국어 日本語
 Hindi Khmer Thai
हिंदी ភ្នំ ไทย

16 Did someone help you fill out or deliver this form?
If yes, the person who helped you must fill out and sign both parts of this green box.
Signature _____ Month / Day / Year
Name, address, and tel: _____

Voter Signature Date Signed: Month Day Year
45 ZB 240819 170001

Important! To vote in the next election, you must mail or deliver this card at least 15 days before the next election. New voters who register by mail may have to show their ID at the polling place the first time they vote.

Optional

Instruct voters to:

- Check box A if they want to be a poll worker and state ethnicity/race on line B

CALIFORNIA VOTER REGISTRATION FORM
SHASTA COUNTY

Fill out this form if you are a new voter, have moved or changed your name, or want to change your political party preference. You must be a U.S. citizen and at least 18 years old by the next election to use this form. Use blue or black ink. Print clearly.

1 Your legal name: First name Middle name

2 Last name *Optional*
 Mr. Mrs. Ms. Miss

3 Home address – not a P.O. Box or business address – (Number, Street, Ave., Drive, etc. Include N, S, E, W) Apt or unit #

4 City State Zip California county
C A

5 If you do not have a street address, describe where you live (Cross streets, Route, N, S, E, W)

6 Mailing address – if different from above, or P.O. Box

7 City State Zip Foreign country

8 Date of birth U.S. state or foreign country of birth

9 CA driver license or CA ID card # If you do not have a CA driver license or ID card, list the last 4 numbers of your Social Security Number, if you have one. * → SSN (Last 4 numbers) Phone numbers are posted at polling places on election day.

10 Email (optional) Phone number (optional)

11 Do you want to disclose a political party preference?
Yes, my political party preference is (check one):
 American Independent Party Americans Elect Party Democratic Party
 Green Party Libertarian Party Peace and Freedom Party
 Republican Party Other (specify):
 No, I do not want to disclose a political party preference.
(If you check this box, you may not be able to vote for some parties' candidates at a primary election for U.S. President or party committee.)

12 Do you receive a vote-by-mail ballot in all elections, initial here: _____

13 If you were registered to vote before, fill out below:
First name Middle initial Last name
Previous address where you were registered City
State Zip Previous county Previous political party preference (if any)

14 Are you a U.S. citizen? Yes No
Will you be 18 or older by the next election? Yes No → "No" answer to either question means you CANNOT register to vote.

15 Read and sign below.
I am a U.S. citizen and will be at least 18 years old on election day. I am not in prison, on parole, serving a state prison sentence in county jail, serving a sentence for a felony pursuant to subdivision (b) of Penal Code section 1170, or on post release community supervision. I understand that it is a crime to intentionally provide incorrect information on this form. I declare under penalty of perjury under the laws of the State of California that the information on this form is true and correct.

16 **Optional**
A. Check here if you can be a poll worker.
If bilingual, indicate language: _____
 Check here if you can provide a polling place on election day.
B. Your ethnicity/race: _____
Check your language preference: English Spanish
 Chinese Vietnamese Korean Tagalog Japanese
中文 Việt ngữ 한국어 日本語
 Hindi Khmer Thai
हिंदी ភ្នំ ไทย

17 Voter Signature Date Signed: Month Day Year
45 ZB 240819 170001

18 **Important!** To vote in the next election, you must mail or deliver this card at least 15 days before the next election. New voters who register by mail may have to show their ID at the polling place the first time they vote.

19 Did someone help you fill out or deliver this form?
If yes, the person who helped you must fill out and sign both parts of this green box.
Signature Month Day Year
Name, address, and tel: _____

If someone helps complete or delivers this form, they must write their name and the date in the top green section.

**CALIFORNIA VOTER REGISTRATION FORM
SHASTA COUNTY**

Fill out this form if you are a new voter, have moved or changed your name, or want to change your political party preference. You must be a U.S. citizen and at least 18 years old by the next election to use this form. Use blue or black ink. Print clearly.

Your legal name: First name _____ Middle name _____

① Last name _____ *Optional*
 Mr. Mrs. Ms. Miss

② Home address – not a P.O. Box or business address – (Number, Street, Ave., Drive, etc. Include N, S, E, W) _____ Apt or unit # _____

④ City _____ State _____ Zip _____ California county _____

⑤ If you do not have a street address, describe where you live (Cross streets, Route, N, S, E, W) _____

⑥ Mailing address – if different from above, or P.O. Box _____

⑦ City _____ State _____ Zip _____ Foreign country _____

⑧ Date of birth _____ U.S. state or foreign country of birth _____

⑨ CA driver license or CA ID card # _____ *If you do not have a CA driver license or ID card, list the last 4 numbers of your Social Security Number, if you have one.* SSN (Last 4 numbers) _____ Phone numbers are posted at polling places on election day.

⑪ Email (optional) _____ Phone number (optional) _____

⑫

⑬

⑭ Do you want to disclose a political party preference?
Yes, my political party preference is (check one):
 American Independent Party Americans Elect Party Democratic Party
 Green Party Libertarian Party Peace and Freedom Party
 Republican Party Other (specify): _____
No, I do not want to disclose a political party preference.
(If you check this box, you may not be able to vote for some parties' candidates at a primary election for U.S. President or party committee.)

⑮ To receive a vote-by-mail ballot in all elections, initial here: _____

⑯ If you were registered to vote before, fill out below:
First name _____ Middle initial _____ Last name _____
Previous address where you were registered _____ City _____
State _____ Zip _____ Previous county _____ Previous political party preference (if any) _____

⑰ Are you a U.S. citizen? Yes No
Will you be 18 or older by the next election? Yes No **A "No" answer to either question means you CANNOT register to vote.**

⑱ **Read and sign below.**
I am a U.S. citizen and will be at least 18 years old on election day. I am not in prison, on parole, serving a state prison sentence in county jail, serving a sentence for a felony pursuant to subdivision (b) of Penal Code section 1170, or on post release community supervision. I understand that it is a crime to intentionally provide incorrect information on this form. I declare under penalty of perjury under the laws of the State of California that the information on this form is true and correct.

Signature: _____ **Date Signed:** Month Day Year
45 ZB 240819 170001

Important! To vote in the next election, you must mail or deliver this card at least 15 days before the next election. New voters who register by mail must have to show their ID at the polling place the first time they vote.

Optional
A. Check here if you can be a poll worker.
If bilingual, indicate language: _____
 Check here if you can provide a polling place on election day.
B. Your ethnicity/race: _____
C. Check your language preference: English Spanish Vietnamese Korean Tagalog Japanese Chinese Khmer Thai Japanese
中文 越南文 韩文 泰文 日文
 Hindi Thai Vietnamese Korean Tagalog Japanese

Did someone help you fill out or deliver this form?
If yes, the person who helped you must fill out and sign both parts of this green box.
Signature _____ Month Day Year
Name, address, and tel: _____

Bottom Portion

If at anytime you assist the voter by filling in their voter registration card, or delivering the card to our office you must complete the green box on the bottom of card.

Tear the bottom off at the perforation and give to the voter – that is the voter's receipt.

**PLEASE OBSERVE THE
FOLLOWING
GUIDELINES WHEN
DISTRIBUTING VOTER
REGISTRATION CARDS**

DO

- Ask if they are registered to vote; if not, offer them a card.
- Ask if they personally know others who are eligible and not yet registered to vote. If they do, offer them a card for those people.
- Make sure people understand the Voter Registration Card is a “*self*” registration card, to be detached and mailed after completion.
- Tell them to use **BLACK** or **DARK BLUE** ink only.
- Encourage them to mail their own cards back; postage is paid.

DO NOT

- Use pencil
- Hand a card to every passerby or go door to door and leave a card.

Ask whether any eligible unregistered voters live in the house.

- Let VRCs in your possession go unused.

Keep them moving.

- Take more cards than you can reasonably expect to use.

Make a distribution plan.

Be Careful!

There are certain activities in registering voters that are prohibited, or are a crime, and can result in prosecution.

The California Elections Code and California Penal Code covers:

- Registering of nonexistent person
- Refusal to give a card to any person that requests one
- Altering a Voter Registration Card
- Interfering with the prompt delivery of completed cards to the Registrar of Voters
- Fraud and forgery
- Other registration crimes

California Penal Code

Specific codes covering crimes include:

- Procuring or offering false or forged instruments for record, violation, punishment

California Elections Code

Specific codes covering crimes include:

- 18100 - Registration of person not entitled to register
This includes “Nonexistent persons” including, but not limited to, deceased persons, animals, and inanimate objects.
- 18101 - Registration of fictitious person
- 18102 - Registration of nonexistent person
- 18103 - Interference with transfer of voter registration card to county elections official
- 18104 - Refusal to return voter registration card
- 18105 - Writing or affixing political statements on voter registration cards
- 18106 - Alteration of affidavit party affiliation
- 18107 - Fine for failure to provide voter registration card
- 2159 - Telephone number and address of person/organization who pays money for completed voter registration cards
Penalties for not complying with section 2159 when registering voters.
- 2159.5 - Requirements for paying for assisting persons to register to vote
•Penalties for not complying with section 2159.5 when registering voters.

POLL WORKERS

On a major election day, approximately 600 Poll Workers are hired to assist citizens with voting at Polling Places throughout Shasta County.

The Elections Office recruits year-round for Poll Workers.

A stipend is paid for serving as a Poll Worker.

This can be an excellent fund raising opportunity for an organization, and a great way to meet your neighbors while serving your community!

If you are interested in becoming

a Poll Worker

please call 530-225-5730

QUESTIONS AND ANSWERS

Please do not attempt to answer questions EXCEPT those answered in this section or to explain how to complete a Voter Registration Card.

When are the polls open?

The polls are open from 7:00 a.m. until 8:00 p.m. on election day.

How do I find my Polling Place?

Before every election every registered voter eligible to vote in that election, on file by the 29 day close, is mailed a Sample Ballot pamphlet, which contains information about the election and the name and address of the polling place. Persons registering between the 29th day and 15th day before an election will receive a card directing them how to obtain voting materials or call our office.

How do I find who my elected officials are?

For information regarding elected officials for Congressional, Senate, Assembly, Supervisorial, etc, please call the Election's Office or contact us on the Internet at www.elections.co.shasta.ca.us.

Do I have to register to vote with a political party?

You do not have to register with a political party. If you wish to register without choosing a qualified political party recognized by the State of California, mark the NO, I do not want to disclose a political party preference box on the voter registration card. You will be listed as a nonpartisan voter.

I am going to be 18 this year. Must I wait until after my 18th birthday to register?

You may register while you are 17 years old. The registration is not effective until your 18th birthday. You must be sure to register at least 15 days before election day in order to vote in the election after your 18th birthday.

How do I receive a Vote-by-Mail Ballot?

Fill out the vote-by-mail ballot application included in the Sample Ballot packet, for each election. There is a box on the application to check and you will become a permanent vote-by-mail voter for future elections. You may also write a letter and request permanent vote-by-mail status. Please call our office for information on this process.

Who has access to the information on my Voter Registration Card?

Voter registration is confidential in California as of January 1, 1995, per California Elections Code 2194 (2). California Elections Code 2188 releases this information to any candidate for federal, state, or local office, to any committee for or against any initiative or referendum measure for which legal publication is made, and to any person for election, scholarly, journalistic, or political purposes, or for governmental purpose, as determined by the Secretary of State.

Direct any other questions on voter registration or elections to the address, email or telephone number listed at the end of this presentation.

Prepared by:

Shasta County

Cathy Darling Allen
County Clerk/Registrar of Voters
1643 Market Street
Redding, CA 96001

Contact us about voter registration:

Kathy Bair

Phone: (530)225-5118

Fax: (530) 225-5454



Please contact our office if you have any questions.

Office Hours: Monday-Friday, 8:00am-5:00pm Excluding Holidays