

SIGNATURE CURE AFFIDAVIT FOR VOTE-BY-MAIL BALLOT

The affidavit is for use by a voter who returns a vote-by-mail ballot containing a signature that does not match the signature on record.

1. INSTRUCTIONS

READ CAREFULLY TO HAVE YOUR VOTE-BY-MAIL BALLOT COUNTED:

Complete and return this form to the Lee County Supervisor of Elections Office no later than 5 p.m. on the day before the election. Use the following as a checklist - you must:

- Complete the affidavit and sign your name on the line above (Voter's Signature) on the affidavit below.
- Include a copy of ONE of the following forms of identification (ID):

Provide a copy of ONE of the following:

<p>Tier 1 identification</p> <p>Identification that includes your name and photograph:</p> <ul style="list-style-type: none"> ➤ <input type="checkbox"/> Florida Driver's License; ➤ <input type="checkbox"/> Florida identification card (<i>issued by DHSMV</i>); ➤ <input type="checkbox"/> United States passport; ➤ <input type="checkbox"/> Debit or credit card; ➤ <input type="checkbox"/> Military Identification; ➤ <input type="checkbox"/> Student Identification; ➤ <input type="checkbox"/> Retirement Center Identification; ➤ <input type="checkbox"/> Neighborhood Association Identification; ➤ <input type="checkbox"/> Public Assistance Identification; ➤ <input type="checkbox"/> Veteran Health Identification <i>(issued by the U.S. Dept. of Veterans Affairs)</i> ➤ <input type="checkbox"/> License to carry a concealed weapon or firearm <i>(issued pursuant to s. 790.06 FS)</i>; ➤ <input type="checkbox"/> Employee identification card <i>(issued by any branch, department, agency, or entity of the Federal Government, the state, a county, or a municipality).</i> 	<p style="color: red; font-size: 1.2em;">OR, Tier 2 identification</p> <p>ONLY IF YOU DO NOT HAVE A TIER 1 FORM OF IDENTIFICATION you can provide a copy of one of the following:</p> <p>Identification that shows your name and current residence address:</p> <ul style="list-style-type: none"> ➤ <input type="checkbox"/> current utility bill; ➤ <input type="checkbox"/> bank statement; ➤ <input type="checkbox"/> government check; ➤ <input type="checkbox"/> paycheck; ➤ <input type="checkbox"/> or, government document <i>(excluding voter identification card).</i> <p style="color: red; font-weight: bold;">IMPORTANT! If you provide Tier 2 identification instead of Tier 1 identification, your signature on this affidavit must match the signature on file in our office or your ballot may not count.</p>
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TRANSMISSION METHOD FOR COMPLETED AND SIGNED AFFIDAVIT

Be sure to include a copy of the required identification.

Completed affidavit and a copy of your required identification must be received no later than 5:00 p.m. on the day before the election.

<p style="color: red; font-weight: bold;">By Mail:</p> <p><i>If you do not use the enclosed, postage-paid return envelope, please be sure to use the address below and affix sufficient postage so your affidavit reaches the Supervisor of Elections on time.</i></p>	<p style="color: red; font-weight: bold;">By Fax:</p>	<p style="color: red; font-weight: bold;">By Email:</p> <p><i>If emailing, please provide these documents as attachments.</i></p>
Supervisor of Elections P O Box 2545, Fort Myers, FL 33902	(239)-533-6322	votebymail@lee.vote
<p style="font-weight: bold;">Contact the Elections Office if you have any questions at (239) LEE-VOTE (533-8683)</p>		

2. AFFIDAVIT

I _____, am a qualified voter in this election and registered voter of Lee County, Florida.

PRINT VOTER'S NAME

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 up to 5 years. I understand that my failure to sign this affidavit means that my vote-by-mail ballot will be invalidated.

X _____

Date: _____

Voter's Signature

Voter's Date of Birth OR Florida Voter Identification Number: _____

Voter's Address: _____