## PROVISIONAL BALLOT CURE AFFIDAVIT – INSTRUCTIONS AND FORM

This affidavit is for a voter whose provisional ballot certificate does not include the voter's signature or whose signature does not match the voter's signature on file.

## 1. INSTRUCTIONS

Read these instructions carefully before completing the affidavit. Failure to follow these instructions may cause your ballot not to count. In order to cure the missing signature or the signature discrepancy on your Provisional Ballot Voter's Certificate and Affirmation, your affidavit should be completed and returned as soon as possible so that so it can reach the Dixie County Supervisor of Elections Office NO LATER THAN 5 p.m. on the second day after the election. You must:

- □ Complete and sign the affidavit below sign on the line above "(Voter's Signature)"
- ☐ Make a copy of one of the following forms of identification (ID):

*Tier 1 identification* – *Current and valid ID that includes your name and photograph:* Florida driver license; Florida identification card issued by the Department of Highway Safety and Motor Vehicles' United States passport; debit or credit card; military, student, retirement center, neighborhood association, or public assistance ID; veteran health ID card issued by U.S. Department of Veterans Affairs; Florida license to carry a concealed weapon or firearm; or employee ID card issued by any branch, department, agency, or entity of the Federal Government, the state, a county, or a municipality.

OR if you do not have one of the above forms of ID use one of these instead:

**Tier 2 identification** – ID 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 ID to the Supervisor of Elections
  - Deliver in person or by someone else to our office at 229 NE 351 Hwy, Suite A, Cross City, Florida (Across from the Courthouse),
  - Fax or email to our office: Fax: (352) 498-1218, E-mail: dixiecountysoe@bellsouth.net or
  - Mail, if time permits, completed affidavit and identification to the address below:

DIXIE COUNTY, SUPERVISOR OF ELECTIONS PO BOX 2057 CROSS CITY, FL 32628

Submitting a provisional ballot affidavit does not establish your eligibility to vote in this election or guarantee that your ballot will be counted. The county canvassing board determines your eligibility to vote through information provided on the Provisional Ballot Voter's Certificate and Affirmation, written evidence provided by you, including information in your cure affidavit along with any supporting identification, and any other evidence presented by the supervisor of elections or challenger. You may still be required to present additional written evidence to support your eligibility to vote. If you have any questions or concerns, please contact the **Dixie County, Supervisor of Elections Office: (352) 498-1216** 

## 2. PROVISIONAL BALLOT CURE AFFIDAVIT

I,(print voter's name)	, am a qualified voter in this election and
ballot and that I have not and will not vote more t fraud in connection with voting, vote a fraudulent	b solemnly swear or affirm that I requested and returned the vote-by-mail han one ballot in this election. I understand that if I commit or attempt any ballot, or vote more than once in an election, I may be convicted of a and imprisoned for up to 5 years. I understand that my failure to sign this e invalidated.
(Voter's Signature)	Voter's Street Address (Residential)
(Eff. 07/2019)	City, State, Zip