# Monterey County Elections
# Replacement Vote by Mail (VBM) Ballot Application
# General Election – November 3, 2026

**E-29 to E-15**

**THIS APPLICATION MUST BE RECEIVED BY OUR OFFICE NO LATER THAN 7 DAYS BEFORE THE ELECTION**

By requesting a replacement vote-by-mail ballot, I hereby certify that I did not receive a vote-by-mail ballot for this election, or if I did receive a ballot, that ballot has been lost or destroyed. Only the registered voter themselves may request a replacement ballot. A request for a replacement ballot that is made by any person other than the registered voter is a criminal offense. (EC 3014(a).)

**Please complete this application in its entirety. Your signature is required.**
**You can return this application in one of the following ways:**

- **By email:** vbm@countyofmonterey.gov
- **By fax:** (831) 755-5485
- **In person at:** 1441 Schilling Place – North Building, Salinas, CA 93901
- **By mail:** Fold the application in half to conceal your information and seal it with adhesive tape. Both sides must be printed, and postage is required.

**YOU HAVE THE LEGAL RIGHT TO MAIL OR DELIVER THIS APPLICATION DIRECTLY TO THE MONTEREY COUNTY ELECTIONS OFFICE.**
QUESTIONS? Call our office at (831) 796-1499 or toll-free at (866) 887-9274.

**1. NAME:** **2. DRIVER'S LICENSE/LAST 4 OF SSN:**

**3. DATE OF BIRTH:** month / day / year **4. E-MAIL** (optional)**:**

**5. HOME ADDRESS IN MONTEREY COUNTY:** ☐ **PLEASE UPDATE MY HOME ADDRESS BELOW:**

Number & Street (DO NOT use P.O. Box, Rural Route, etc.). Designate N, S, E, W if used.

City Zip Code

**6. MAILING ADDRESS FOR BALLOT, IF DIFFERENT FROM ABOVE:**

Number & Street / P.O. Box (Designate N, S, E, W if used)

City State or Foreign Country Zip Code

**7. PREVIOUS HOME ADDRESS IN MONTEREY COUNTY**

Number & Street

City State or Foreign Country Zip Code

**8. TELEPHONE** (optional): **DAYTIME** ( ) **EVENING** ( )

**9. SIGNATURE:** This application ***cannot*** be accepted without the proper signature of the applicant.
I certify under penalty of perjury, under the laws of the State of California, that all the information I have provided on this application is true and correct.
***WARNING:*** *Perjury is a felony, punishable by imprisonment in state prison for up to four (4) years. (Penal Code §126)*

X
**SIGNATURE** **DATE**

**INTERNAL USE ONLY:**

**VID #:** **RCVD Date:** **Proc Date:** **By:**

**NOTES:**

POSTAGE
REQUIRED

*FRANQUEO*
*REQUERIDO*

**MONTEREY COUNTY ELECTIONS**
**PO BOX 4400**
**SALINAS, CA 93912-4400**