

**KERN COUNTY ELECTION
SIGNATURE UPDATE REQUEST**

I request my signature on my voting registration to be updated.

Name:	
Residence Address:	Mailing Address (if different):
City, State, Zip:	City, State, Zip:
Date of Birth:	Telephone: <small>(Will only be used if additional information is needed)</small>

If you are no longer able to write your signature, you may make a mark "X" and have it witnessed by a family member. Please note that someone with power of attorney over you, may not sign your name, but can witness your mark.

I declare under penalty of perjury that the foregoing is true and correct.

Voter's current signature or mark: _____

Witnessed by if using mark: _____

Mail or bring form to: Kern County Elections Office, 1115 Truxtun Ave., 1st Floor, Bakersfield, CA 93301

OR, fax form to: 661-868-3723

Questions? Call: 661-868-3590 or toll free 1-800-452-8683