



togetherforbetter

Election Department

965 Trade Dr • Ste A • North Las Vegas NV 89030
Voter Registration (702) 455-8683 • Fax (702) 455-2793
Lorena S. Portillo, Registrar of Voters

Re: Missing Mail Ballot Signature or Signature Mismatch


Dear Voter,

We have received your mail ballot return envelope for the November 5, 2024, General Election. Nevada election law requires us to compare the signature on your ballot return envelope with the signatures in your voter registration record to verify your identity. Unfortunately, either your ballot return envelope did not have a signature, or we were unable to verify your signature.

For your ballot to count, you must complete, sign, and return the attached Signature Cure Affidavit OR cure your signature using one of the options below, before 5:00 pm, November 12, 2024. Please note that you will also be required to return a photocopy of your identification OR answer all the challenge questions in Step 5 of the attached Signature Cure Affidavit.

If you indicate that you have not returned a ballot, or if you fail to return the attached affidavit or cure your signature using the other options provided below, your ballot will not be counted.

If you have questions, please contact our office at (702) 455-6552.

Option 1: Mobile Device	Option 2: Provide Copy of ID	Option 3: Answer Challenge Questions
<p>Please use your mobile device to scan the QR code or go to https://www.nvsos.gov/sos/elections/voters/signature-cure/cure-qr-clark</p>  <p><i>*Standard messaging rates apply. You will receive only one message. Must be received before 5:00 pm, November 12, 2024.</i></p>	<ol style="list-style-type: none"> 1. Complete and sign the Signature Cure Affidavit on the back of this letter. 2. Follow the instructions in Step 4 to provide a copy of your ID. 3. Return the Signature Cure Affidavit and a copy of your ID to Clark County Election Department either in-person or by e-mail, fax, or mail provided in Step 6. * <p><i>*In-person, e-mail, fax, or mail must be received before 5:00 pm, November 12, 2024. Postmarks do not count.</i></p>	<ol style="list-style-type: none"> 1. Complete and sign the Signature Cure Affidavit on the back of this letter. 2. Answer all 3 questions in Step 5. 3. Return the Signature Cure Affidavit to Clark County Election Department in-person or by e-mail, fax, or mail provided in Step 6 * Or call (702) 455-6552 to cure your signature without returning the affidavit. <p><i>*The signed cure affidavit or verifying phone call must be received before 5:00 pm, November 12, 2024. Postmarks do not count.</i></p>

Sincerely,

Lorena S. Portillo
Registrar of Voters

BOARD OF COUNTY COMISSIONERS

TICK SEGERBLOM, Chair • WILLIAM MCCURDY II, Vice Chair
JAMES B. GIBSON • JUSTIN C. JONES • MARILYN KIRKPATRICK • ROSS MILLER • MICHAEL NAFT
KEVIN SCHILLER, County Manager

Signature Cure Affidavit

Complete, sign, and return this affidavit to the Clark County Election Department

STEP 1 YOUR NAME: _____
First Name Last Name

STEP 2 DID YOU RETURN A BALLOT? Yes No *If "No", do not complete any steps beyond Step 3.*

If "Yes" is selected above: I state under penalty of perjury that I am an eligible elector; that my signature and name are as shown on this affidavit; and that I have only cast one ballot in this election in accordance with the provisions of NRS 293.780.

If "No" is selected above: I affirm that the information I have provided on this affidavit is true and correct to the best of my knowledge.

STEP 3 SIGN: X _____ **Date** _____ / _____ / _____
Your Signature or Mark Today's Date (mm/dd/yyyy)

STEP 4 FOR OPTION 2 ONLY
MAKE A COPY OF AN ACCEPTABLE FORM OF ID

- A driver's license
- An ID card issued by the Nevada DMV
- A military identification card
- Identification provided by a governmental agency which contains your signature and a physical description or picture. Such governmental agencies include, but are not limited to:
 - Any federal or state branch, department, agency, or entity, or by any state county, municipality, or other political subdivision. Examples may include a U.S. passport, a veteran ID card issued by the U.S. Department of Veterans Affairs Veterans Health Administration, an ID card issued by a federally recognized tribal government, and a pilot's license issued by the Federal Aviation Administration.

FOR OPTION 3 ONLY
STEP 5 ANSWER ALL OF THE FOLLOWING QUESTIONS – You may provide answers to these verifying questions verbally by calling the Election Department.

- Last 4 Digits of Your Social Security Number _____
- Place of Birth _____
- Date of Birth _____

I affirm that the answers I have provided above are true and correct to the best of my knowledge.

(Sign or initial above)

STEP 6 RETURN THIS AFFIDAVIT AND A COPY OF YOUR ID, IF APPLICABLE.
 Return this affidavit and a copy of your ID, if applicable, to the Clark County Election Department before 5:00 pm on November 12, 2024.

- **In-Person:** 965 Trade Drive, Suite A, North Las Vegas, NV 89030
- **Email:** mailballotrequest@clarkcountynv.gov
- **Fax:** (702) 455-2831
- **Mail or delivery:** Clark County Election Department
 P.O. Box 3910
 Las Vegas, NV 89127-3910

For County Office Use Only:

Verifier's Name: _____ ID has been verified: DL / Passport / Other: _____