MAR VISTA COMMUNITY COUNCIL ELECTION TO RECEIVE BALLOT YOU MUST APPLY BY JUNE 1

INSTRUCTIONS - VOTE-BY-MAIL APPLICATION VIA EMAIL
- Live in Mar Vista - MV Address on Driver's License or ID Card -

COMPLETE SECTIONS 1, 2 (resident only), 3, and 4:

	*PRINT VOTER INFORMATION – Please print clearly.						
1	First Name: your first name Middle Name:		Last I	Name: <u>you</u>	r last name		
	Birthdate: birthdate Phone Number: (your phone #	Email:	your e	mail addres	SS		
	*ESTABLISH YOUR STAKEHOLDER STATUS – Place an "X" in the appropriate box below.						
7	I qualify to vote inMar Vista CC (MVCC)	_ Neighborhood Council because:					
	I am a resident of the Neighborhood Council and live at:						
	Address: your address		_City:C	os Angeles	zip: your zip		
3	*MAIL MY BALLOT TO (please provide mailing address if different from above, including service provider, if applicable):						
	Address:	_Apt #:	_ City:		Zip:		
	*SIGN DOCUMENT: I, the undersigned, declare under penalty of perjury that the above statements are true and correct:						
4	Signature: your signature			Date:	today's date		

NEXT: Take photo of completed application.

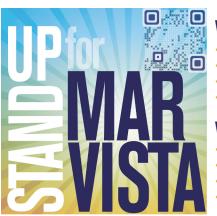
NEXT: Take photo of driver's license or ID card.

If desired, edit the photo to redact driver's license or ID number.

(all smart phones have built in drawing capabilities for photos; press edit photo)

FINAL: Email both photos to Clerk.ElectionVBM@LACity.org

SUBJECT: MVCC Election Application



WE STAND UP AGAINST

- Homeless Encampments in Neighborhoods
- Overdevelopment
- Crime
- Increased Traffic

WE STAND UP FOR

- Holding Our City Leaders Accountable
- Protecting Mar Vista Park
- Keeping Neighborhoods Safe
- Preserving Our Environment

info@StandUpForMarVista.com │ 310-929-0512

StandUpForMarVista.com

For questions regarding the application process or if you have not received your ballot in a timely fashion, please contact the city clerk's office:

888-873-1000

213-978-0444

clerk.electionvbm@lacity.org



2021 Neighborhood Council (NC) Elections Vote-By-Mail (VBM) Application



IMPORTANT: To qualify to receive a ballot, you must complete a VBM Application using the online portal at clerk.lacity.org/elections, or return this completed application to the address provided at the bottom. Incomplete applications will not be processed. Complete applications must have all of the required information (*) included. The last day to apply for a VBM ballot is seven (7) days prior to the election by 5:00 p.m., see the 2021 Neighborhood Council Timeline for specific deadlines. Some of the information on the VBM Application is subject to the California Public Records Act, see 2021 Neighborhood Council Election Handbook section 8.4 for more information.

	APPLICAT	TON INSTRUCTIONS ON C	OTHER SIDE						
*PRINT VOTER INFORMATION — Please print clearly.									
1	First Name:	Middle Name:	Last Name:						
	Birthdate://Phone Number: (_)Email:							
	ESTABLISH YOUR STAKEHOLDER STATUS – Place an "X" in the appropriate box below.								
	I qualify to vote in	Neighborh	nood Council because:						
	I am a resident of the Neighborhood Counci	l and live at:							
	Address:			Zip:					
	I own a business or work within the Neighborhood Council at:								
	Name of Business or Work Place:								
	Address:		City:	Zip:					
2	I own real property in the Neighborhood Co	ouncil at:							
	Address:		City:	Zip:					
	than one year, and that performs ongoing a within the NC's boundaries. A for-profit ent Name of Organization:	ity shall not qualify as a Comm	unity Organization:	neighborhood, and is located					
	Address:		City:	Zip:					
2	*MAIL MY BALLOT TO (please provide mailing address if different from above, including service provider, if applicable):								
3	Address:	Apt #:	City:	Zip:					
	*SIGN DOCUMENT: I, the undersigned, declare under penalty of perjury that the above statements are true and correct:								
4	Signatura		Date						
	Signature: I designate the following agent to return my VB	M application on my behalf.	Date:						
5		··· ,							
	Print Name of Authorized Agent			f Authorized Agent					
This application must be received at least seven days prior to Election Day. Return your completed forms using one of the following 3 options:									
	1. Mail Application to:		2. Email:						
Office of the City Clerk - Election Division 555 Ramirez Street, Space 300		OR	OR clerk.electionvbm@lacity.org 3. Fax: (213) 978-0376						
Los Angeles, CA 90012 MUST SUBMIT DOCUMENTATION WITH APPLICATION									
TO BE COMPLETED BY VBM STAFF									
List document(s) provided (if applicable):									
Exp. date (if applicable):									
Ent	ered by:		Date	e:					