



**選民宣誓書及交回選票表格**  
**2024 年 11 月 5 日選舉**

僅於使用非官方信封或以傳真方式交回您的選票時才需要填寫此表格。

**A. 自備兩個空白信封寄回您的選票：**

1. 取出兩個空白信封。將您的選票打印本放入第一個信封，然後把信封密封。
2. 在信封正面寫上：**Official Ballot – To Be Opened Only by the San Francisco Department of Elections**
3. 填妥此表格並簽名，然後連同您密封了選票（內層）的第一個信封，放入第二個信封內。
4. 在第二個（外層）的信封上寫上：**Department of Elections, 1 Dr. Carlton B. Goodlett Place, Ste. 48, SF, CA 94102**
  - 如以郵遞方式交回您的選票，請貼上足夠郵資的郵票，並於選舉日或之前寄出（請務必查明郵箱的收件時間，以至確定信封上的郵戳將會蓋上選舉日或之前的日期）。
  - 如親身或委託他人交回您的選票，請於選舉日晚上 8 時前交回官方選票投遞箱或投票站。


**B. 用傳真方式交回您的選票**，請填妥和簽署此表格，於選舉日，太平洋時間晚上 8 時前，連同您的選票或打印本的選票傳真至 (415) 554-4372。（只有身居海外的選民，或於選舉日之前一星期以內奉召於美國境內服役的軍人才可以用傳真的方式交回選票。）

為了確保您的選票被計算，請務必 1) 填妥並親筆簽署此表格（不接受授權人簽署），2) 在同一時間內交回此表格及您的選票。

如您有任何疑問或需要協助，請電郵 [SFVote@sfgov.org](mailto:SFVote@sfgov.org) 或致電 (415) 554-4367 聯絡我們。

**1. 選民聲明**

本人同意在使用上述其中一個方法交回我的選票時，本人隨即放棄我的選票保密權（因為選票必須被複製到正式選票以作掃描），本人也明白，我在此表格上的簽名將與我投下的選票永久分離，以維持選票從點票過程開始以及往後的保密性。本人聲明，本人是加州三藩市的居民，或根據《選舉法》§ 321，本人符合資格在三藩市的選舉中投票。本人未曾投票，亦沒有意圖在同一次的選舉使用任何其他司法管轄區的選票投票。本人明白重複投票即屬犯罪。

姓名：	電郵地址（自願填寫）：
居住地址：	郵寄地址（如在海外或軍人）：
<b>在此簽署：</b> <span style="float: right;">日期：</span> 	

**2. 第三者交回選票同意書（如經由第三者代您郵遞或傳真您的選票，請填寫以下資料：）**

代選民交回選票者的姓名：	
代選民交回選票者的簽署：	日期：



**Voter Oath and Ballot Return Form  
 November 5, 2024 Election**

*Only complete this form if you are returning your voted ballot using unofficial envelopes or by fax.*

**A. To return your ballot with two plain envelopes:**

1. Find two plain envelopes. Place your ballot printout into the first envelope, then seal it.
2. Write "Official Ballot – To Be Opened Only by the San Francisco Department of Elections" on the front of the envelope.
3. Complete, sign, and enclose this form, along with your first (inner) envelope, into a second envelope.
4. Address the second (outer) envelope to: Department of Elections, 1 Dr. Carlton B. Goodlett Place, Ste. 48, SF, CA 94102
  - To return your envelope by mail, add postage and mail it by Election Day (check pickup times to ensure a timely postmark).
  - To return your envelope in person (including via third party), visit an official drop box or voting site by 8 p.m. on Election Day.

**B. To return your ballot by facsimile transmission**, complete, sign, and fax this form with your ballot or ballot printout to (415) 554-4372 by 8 p.m. Pacific Time on Election Day. (Only voters living outside the U.S. or called to service within the U.S. within one week of Election Day can return ballots by fax.)

**Your ballot cannot be counted unless you 1) complete and sign this form in your own handwriting (power of attorney is not acceptable), 2) return both this form along with your ballot together at the same time.**

If you have questions or need assistance, contact us at SFVote@sfgov.org or (415) 554-4375.

**1. Voter Declaration**

I acknowledge that by returning my ballot using one of the return options above, I have waived my right to have my ballot kept secret (because it must be duplicated onto an official ballot for scanning) but also understand that my signature on this form will be permanently separated from my voted ballot to maintain its secrecy at the outset of the tabulation process and thereafter. I declare I am either a resident of San Francisco, California, or I am qualified to vote in San Francisco elections pursuant to §321 of the Elections Code. I have not voted, nor intend to vote, a ballot from any other jurisdiction for the same election. I understand that voting twice is a crime.

Full name:	Email address (optional):
Residential address:	Mailing address (if overseas or in the military):
<div style="display: flex; justify-content: space-between;"> <div style="text-align: left;"> <p><b>Sign here:</b></p> </div> <div style="text-align: right;"> <p>Date:</p> </div> </div>	

**2. Third Party Return Consent (Complete only if someone else mails or faxes your ballot for you.)**

Full name of person returning the voter's ballot:	
Signature of person returning the voter's ballot:	Date: