William "Scott" Hoen
Carson City Clerk-Recorder

Office of the County Clerk
885 East Musser St., Ste. 1025
Carson City, NV 89701
Tele: 775.887.2087
Fax: 775.887.2146

Re: Missing Mail Ballot Signature or Signature Mismatch

Dear Voter,

We have received your voted ballot 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 with those on file.

In order for your ballot to count, you must complete, sign, and return the attached Signature Cure Affidavit OR cure your signature using one of the other below options, by 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 voted 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 775-887-2087 or by email at elections@carson.org

Option 1: Mobile Device	**Option 2: Provide Copy of ID**	**Option 3: Answer Challenge Questions**
1. Go to: www.NVSOS.gov/sos/Cure 2. Select your County and scan the County QR code or click on the link at the bottom of the page. 3. Follow the steps provided. 4. When prompted, use the camera on your mobile device to take and submit a photo of your identification, etc., including your Signature Cure Affidavit.* **Standard messaging rates apply. You will receive only one message. Must be received before 5:00 pm, November 12, 2024.*	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 Carson City Clerk's Office in-person or by email, fax, or mail. ***** **Email, fax, or mail must be received before 5:00 pm, November 12, 2024. Postmarks do not count.*	1. Complete and sign the Signature Cure Affidavit on the back of this letter or call your County Elections Office to answer the verifying questions verbally. 2. Answer all 3 questions in Step 5. 3. Return the Signature Cure Affidavit to Carson City Clerk's in-person or by email, fax, or mail, or call your 775-887-2087 to provide your answers verbally. ***** **The signed cure affidavit or verifying phone call must be received before 5:00 pm, November 12, 2024. Postmarks do not count.*

Thank you for your assistance.

Signature Cure Affidavit

Complete, sign, and return this affidavit to the Carson City Clerk's Office

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 in step 2: 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 step 2: 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**_____ ____/____/____

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 valid Nevada driver's license
- A valid ID card issued by the Nevada DMV
- A valid U.S. passport or passport card
- A valid employee ID card with a photograph of the eligible elector issued by any branch, department, agency, or entity of the U.S. government or Nevada, or by any county, municipality, board, authority, or other political subdivision of Nevada
- A valid pilot's license issued by the Federal Aviation Administration or other authorized agency of the U.S.
- A valid U.S. military ID card with a photograph of the eligible elector
- A valid veteran ID card issued by the U.S. Department of Veterans Affairs Veterans Health Administration with a photograph of the eligible elector
- A valid Medicare or Medicaid card issued by the U.S. Health Care Financing Administration
- A certified copy of a birth certificate for the elector issued in the U.S.
- Certified documentation of naturalization
- A valid student ID card with a photograph of the eligible elector issued by an institution of higher education in Nevada
- A valid ID card issued by a federally recognized tribal government certifying tribal membership

STEP 5 **FOR OPTION 3 ONLY**
ANSWER ALL THE FOLLOWING QUESTIONS

- Last 4 Digits of the 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 Above)

STEP 6 **RETURN THIS AFFIDAVIT AND A COPY OF YOUR ID (If required).**

Return this affidavit and a copy of your ID (if required) to the Carson City Clerk's Office before 5:00 pm (PST) on **Novermber 12, 2024**

- **Use a mobile device:** : www.NVSOS.gov/sos/Cure. Select your county. Follow the steps provided. When prompted, use the camera on your mobile device to take and submit a photo of your identification, etc
- **Email:** elections@carson.org
- **Fax:** 775-887-2146
- **Mail or delivery:** 885 E. Musser St., Suite 1025 Carson City, NV 89701

June 2024 For County Office Use Only: Date of Receipt:____/____/____

Name Jerry Reynolds_____ Voter ID: _____

☐ **ID has been verified: DL Passport Other:** _____

(Circle One)**: DL Passport Other:** _____
(Circle One)