No Party Preference Cross-Over Ballot Notice and Application
March 5, 2024, Presidential Primary Election

FOR OFFICIAL USE ONLY

NOTICE: Any voter that has declined to disclose a political party preference on their voter registration may request a one-time ballot for a political party that is allowing cross-over voting in the presidential primary election.

1. **THIS IS AN APPLICATION TO RECEIVE A CROSS-OVER BALLOT:**
   I have declined to disclose a preference for a qualified political party. The below-listed political parties are allowing cross-over voting in this election. For the March 5, 2024, Presidential Primary Election only, I request a ballot for the following political party (select only one):

   ☐ American Independent Party   ☐ Democratic Party   ☐ Libertarian Party

2. **PRINT NAME:** _____
   First   Middle or Initial   Last

3. **DATE OF BIRTH:** _____
   Month/Day/Year

4. **RESIDENCE ADDRESS:** _____
   Number and Street (P.O. Box, Rural Route, etc. will not be accepted)   (Designate N, S, E, W if used)

   _____
   City   Zip Code   California County

5. **MAILING ADDRESS FOR BALLOT (IF DIFFERENT FROM ABOVE):**
   If your mailing address is outside of the U.S., and you are a military or overseas voter, register at RegisterToVote.ca.gov or use the Federal Post Card Application at www.fvap.gov.

   _____
   Number and Street/P.O. Box (Designate N, S, E, W if used)

   _____
   City   State or Foreign Country   Zip Code or Postal Code

6. **THIS APPLICATION MUST BE SIGNED.**

   SIGNATURE _____   **DATE** _____

WHO CAN USE THIS APPLICATION

If you are not registered to vote with any political party and you would like to vote for a presidential candidate for a political party which allows cross-over voting in the presidential primary election, you may use this application to request a political party's ballot.

HOW TO FILL OUT THIS APPLICATION

ITEM 1. If you are registered to vote and have not disclosed a political party preference, select the eligible political party whose ballot you would like to receive.

ITEM 2. Print your first, middle, and last names as they appear in your voter registration record.

ITEM 3. Print your date of birth in this order – month, day, year.

ITEM 4. Print the complete street address of your voting residence. A post office box or rural route cannot be accepted.

ITEM 5. If your mailing address differs from your residence, print the complete address where you want your ballot sent.

ITEM 6. Print the form. Sign and date in this order – month, day, year. No witness or notary required.

HOW TO SUBMIT THE APPLICATION

Your Cross-Over Ballot Application can be returned:

- In person or by mail to:

  Solano County Registrar of Voters
  675 Texas St, Ste 2600
  Fairfield, CA 94533

- By email to elections@solanocounty.com (either scan the form or take a picture with your phone)

  - By fax to 707-784-6678

You can also request a party ballot over the phone during office hours, Monday through Friday 8:00 AM to 5:00 PM, by calling the Solano County Registrar of Voters office at 707-784-6675.