



Washington County Board of Elections

Materials Contained in the White Elections Supply Box

- Clear bag containing pens and scotch tape
- Specimen Ballots
- White envelope containing signs to post in 3 places at Polling Place
- 2 numbered list of voters gold books and respective envelopes
- Pay Vouchers
- 2 Election Officers' Oaths and respective envelopes
- Affidavit of Voter Identification
- Declaration of the Need for Assistance to Vote
 - Completed by Voters requesting assistance while voting
- Record of Assisted Voters & respective envelope
- Affirmation of Elector and its respective envelope
 - Completed by Inactive Voters and Voters who need to change their address (in County address changes only)
- 2 General Return of Votes Cast
- Spoiled Ballot Envelope
 - For spoiled ballot activation cards
- Clear bag for surrendered Absentee/Mail in Ballots
- Election Return Envelope A – returned to Elections Office
- Minority Inspector Envelope B
- Elector's Declaration to Surrender Their Mail Ballot
- Challenges form containing Elector's Affidavit and Supporting Affidavit
 - Completed and signed by a Voter when their identity or legal residence in a precinct is challenged.
- Statement of Complaint – violations of Title III of the Help America Vote Act of 2002.
 - Given to a Voter who wants to file a formal complaint of a violation to the Help America Vote Act.
 - The Voter is given the form to complete and mail to the PA Department of State in Harrisburg.

DECLARATION Of the Need for Assistance to Vote

I _____
(Printed name of elector requiring assistance) (Voter Reg./Serial Number)

(Address of elector) (Birthdate)

By reason of _____ am unable to vote without the
(Reason for needing assistance)

assistance of _____

(Signature or mark of elector requiring assistance) (Date)

Witnessed by _____
(Name of witness)

(Signature of Judge of Election) (District)

RETURN WITH FORM 4 - RECORD OF ASSISTED VOTERS

COPY

DECLARATION Of the Need for Assistance to Vote

I _____
(Printed name of elector requiring assistance) (Voter Reg./Serial Number)

(Address of elector) (Birthdate)

By reason of _____ am unable to vote without the
(Reason for needing assistance)

assistance of _____

(Signature or mark of elector requiring assistance) (Date)

Witnessed by _____
(Name of witness)

(Signature of Judge of Election) (District)

RETURN WITH FORM 4 - RECORD OF ASSISTED VOTERS

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CHALLENGES ELECTOR'S AFFIDAVIT

The following affidavit is to be executed by an elector of the district who is challenged with respect to the elector's identity or legal residence in the district; or by an elector challenged for bribery or other violation of the Election Laws.

COMMONWEALTH OF PENNSYLVANIA, }
_____ COUNTY, } S.S.

I, _____ being duly sworn, depose and say: That I am a resident of the Commonwealth of Pennsylvania, that I presently reside at or up to _____,

(If removed from district insert date of removal which must be within 30 days immediately preceding this Primary or Election) did reside at _____;

(Show residence here)

that I am qualified to vote in the _____ Ward, _____ District, City Borough of _____ Township

that I have had a continuous residence at the address set forth on my registration card; or that I removed from the district within thirty days immediately preceding this Primary or Election; that I am the identical person whose name is set forth on said registration card, and further, that I have not committed bribery at this Primary or Election, nor have I violated any election laws of this Commonwealth.

COPY

Sworn and subscribed this _____ day of _____, 20 ____ before _____

Judge of Elections

(Signature of Elector Challenged)

SUPPORTING AFFIDAVIT

The following supporting affidavit is to be executed by another qualified elector of the district in case of the challenge of an elector as to identity or legal residence in the district.

COMMONWEALTH OF PENNSYLVANIA, }
_____ COUNTY, } S.S.

I, _____ being duly sworn, depose and say: That I reside at _____,

that I am a qualified elector of _____ Ward, _____ District, City Borough of _____ Township

COPY

that I am personally acquainted with _____, whose right to vote has been challenged, and I know said elector is a resident of the Commonwealth of Pennsylvania, and that said elector has continuously resided or did reside within thirty days immediately preceding this Primary or Election, at the address set forth on his or her registration card.

Sworn and subscribed this _____ day of _____, 20 ____ before _____

Judge of Elections

(Signature of Elector making this Supporting Affidavit)

AFFIDAVIT OF VOTER IDENTIFICATION

COPY

To be signed after the close of the polls.

_____The undersigned, members of the district election board for the election district designated as _____ (e.g., municipality, ward, precinct, division, etc) by the Board of Elections of _____ County, having been duly sworn according to law, state as follows:

1. I understand that, before certain electors who appear to vote are permitted to cast a ballot in the ordinary manner, the law requires an individual to present to an election officer for examination either a proper form of photo identification or, if the individual does not have proper photo identification, a proper form of identification that shows the name and address of the elector.

2. I further understand that in the event that the district register indicates that an elector appearing to vote is required to show proper identification, it is the responsibility of the responsible election officer(s) to require the elector to present a proper form of identification and to examine the identification presented to determine whether the identification is proper and demonstrates to the satisfaction of the inspectors of election and/or the judge of elections that the individual appearing to vote is a registered and qualified elector of the election district.

3. I further understand that in the event that an election officer has examined the identification presented and the elector has been permitted thereafter to sign the district register and to vote in the ordinary manner, the election officer who examined the identification is required to indicate that he or she has examined the elector's identification by affixing his or her initials next to the name of the elector in the district register in the place designated for such purpose.

4. Based on the aforesaid understandings, where my initials appear in the district register indicating that I have examined an elector's identification, I swear under oath that I did in fact examine the identification presented by the elector as required by law.

COPY

Judge of Elections

Majority Inspector

Minority Inspector

Majority Clerk

Minority Clerk

SWORN AND SUBSCRIBED BEFORE US* ACCORDING TO LAW, this _____ day of _____, _____.

Judge of Elections

Majority Inspector

Minority Inspector

*An election officer who signed above cannot administer an oath to himself. Therefore, it is important that another constitutional officer administer the oath to an election officer who has examined voter identification.

AFFIRMATION OF ELECTOR

For use in the polling place when an elector has changed addresses and has failed to notify the commission or when registration records incorrectly indicate that an elector has changed addresses.

_____ County Board of Elections
City, Borough or Township _____ Ward _____ Precinct _____
Date _____

Please complete either Part A or Part B of this form, whichever is applicable, and sign and date Part C of this form before the election official.

A. Change of address:

If you have changed addresses, please check one of the following boxes and list your new address:

- () I still reside in the same county and in the area covered by this polling place and wish to vote here.
- () I still reside in the same county but in an area covered by a different polling place and wish to vote at this polling place for the last time.
- () I now reside in a different county and wish to vote here for the last time. Please cancel my registration in this county. *(To register to vote at your new address, you should contact your local voter registration office.)*

My previous residence address is:

My new residence address is:

PRINT NAME: _____ PRINT NAME: _____
 STREET: _____ STREET: _____
 CITY, STATE: _____ CITY, STATE: _____

B. If you have not changed your address please check the following box:

- () I have not changed my residence and wish to remain registered to vote in this county.

C. Affirmation

I hereby swear or affirm that the information that appears above is true and correct to the best of my knowledge under penalty of perjury.

Signature of Elector

Print Name

Date

Date of Birth

On the above date, the above elector came before me and affirmed the information contained herein to be true and correct.

Signature of Election Official

To be made in DUPLICATE

One copy to be placed in ENVELOPE G
One copy to be placed in ENVELOPE H

ELECTION OFFICERS' OATHS

"I.....**DO SWEAR (OR AFFIRM)**
That I will, as **JUDGE** duly attend the ensuing Election or Primary during the continuance thereof, and in cooperation with the Inspectors, faithfully carry on the same; that I will not give my consent to the admission of any person to vote, except such as I firmly believe to be registered and entitled to vote at such Election or Primary, according to the provisions of the Constitution and Laws of this Commonwealth, and that I will use my best endeavors to prevent any fraud, deceit, or abuse in carrying on the same, and that I will make a true and perfect return of the said Election or Primary, and will at all times impartially and faithfully perform my duty respecting the same, to the best of my judgment and ability; and that I am not directly or indirectly interested in any bet or wager on the result of this Election or Primary."

Sworn (or affirmed) and subscribed this
_____ day of _____, 20____, before me }
_____ Minority Inspector } Judge of the _____ Ward _____ District
of _____

"I.....**DO SWEAR (OR AFFIRM)**
That I will, as an **INSPECTOR** duly attend the ensuing Election or Primary during the continuance thereof, and that I will not admit any person to vote except such as I shall firmly believe to be registered and entitled to vote at such Election or Primary, according to the provisions of the Constitution and Laws of this Commonwealth. That I will not vexatiously delay or refuse to permit any person to vote whom I shall believe to be entitled to vote as aforesaid. That I will make a true and perfect return of the said Election or Primary, and that I will, in all things, truly, impartially and faithfully, perform my duties therein to the best of my judgment and ability; and that I am not directly, or indirectly, interested in any bet or wager on the result of this Election or Primary."

Sworn (or affirmed) and subscribed this
_____ day of _____, 20____, before me }
_____ Judge } Majority Inspector the _____ Ward _____ District

COPY

"I.....**DO SWEAR (OR AFFIRM)**
That I will, as an **INSPECTOR** duly attend the ensuing Election or Primary during the continuance thereof, and that I will not admit any person to vote except such as I shall firmly believe to be registered and entitled to vote at such Election or Primary, according to the provisions of the Constitution and Laws of this Commonwealth. That I will not vexatiously delay or refuse to permit any person to vote whom I shall believe to be entitled to vote as aforesaid. That I will make a true and perfect return of the said Election or Primary, and that I will, in all things, truly, impartially and faithfully, perform my duties therein to the best of my judgment and ability; and that I am not directly, or indirectly, interested in any bet or wager on the result of this Election or Primary."

Sworn (or affirmed) and subscribed this
_____ day of _____, 20____, before me }
_____ Judge } Minority Inspector the _____ Ward _____ District
of _____

"I.....**DO SWEAR (OR AFFIRM)**
That I will, as a **CLERK**, attend the ensuing Election or Primary during the continuance thereof. That I will carefully and truly record the number of votes that shall be given for each candidate at the Election or Primary as often as his name shall be read to me by the Judge or Inspector thereof and in all things truly and faithfully perform my duty respecting the same, to the best of my judgment and ability and that I am not directly, or indirectly, interested in any bet or wager on the result of this Election or Primary."

Sworn (or affirmed) and subscribed this
_____ day of _____, 20____, before me }
_____ Judge } Majority Inspector's Clerk of the _____ Ward
District of _____

"I.....**DO SWEAR (OR AFFIRM)**
That I will, as a **CLERK**, attend the ensuing Election or Primary during the continuance thereof. That I will carefully and truly record the number of votes that shall be given for each candidate at the Election or Primary as often as his name shall be read to me by the Judge or Inspector thereof and in all things truly and faithfully perform my duty respecting the same, to the best of my judgment and ability and that I am not directly, or indirectly, interested in any bet or wager on the result of this Election or Primary."

Sworn (or affirmed) and subscribed this
_____ day of _____, 20____, before me }
_____ Judge } Minority Inspector's Clerk of the _____ Ward
District of _____

COPY

"I.....**DO SWEAR (OR AFFIRM)**
That I will, as **OVERSEER** of the Election or Primary, truly and faithfully perform my duties, respecting the same, to the best of my judgment and ability; and as Overseer, I will carry out my duties according to the provisions of the Constitution and Laws of this Commonwealth."

Sworn (or affirmed) and subscribed this
_____ day of _____, 20____, before me }
_____ Judge } Overseer of the _____ Ward _____ District
of _____

"I.....**DO SWEAR (OR AFFIRM)**
That I will, as **OVERSEER** of the Election or Primary, truly and faithfully perform my duties, respecting the same, to the best of my judgment and ability; and as Overseer, I will carry out my duties according to the provisions of the Constitution and Laws of this Commonwealth."

Sworn (or affirmed) and subscribed this
_____ day of _____, 20____, before me }
_____ Judge } Overseer of the _____ Ward _____ District
of _____

Elector's Declaration to Surrender Their Mail Ballot

For the Voter:

I hereby declare that I am a qualified registered elector who was issued an absentee or mail-in ballot for this election, but that I have not mailed or cast an absentee or mail-in ballot in this election. Instead, I am hereby remitting my absentee or mail-in ballot and its declaration envelope to the judge of elections at my polling place to be spoiled. I request that my absentee or mail-in ballot be voided, and that I be permitted to sign the poll book and vote a regular ballot.

I verify that the statements made in this declaration are true and correct to the best of my knowledge and belief. I understand that false statements made herein are subject to the criminal penalties of 18 Pa.C.S. § 4904, relating to unsworn falsification to authorities.

(Today's Date) _____

(Printed Name of Elector) _____

(Signature of Elector) _____

COPY

(Address of Elector) _____

For Election Officials Only:

I hereby declare I have received the voter's ballot and envelope containing the voter's declaration from the voter and I am spoiling it and permitting the voter to sign the poll book and vote a regular ballot.

(Printed Name of Judge of Elections) _____

(Judge of Elections Signature) _____

(Precinct) _____

Instructions after completion: This form should be attached to the voter's surrendered balloting material and returned in the envelope designated for spoiled ballots. Do not forget to check the "BALLOT REMITTED?" option next to the voter's name in the poll book.

Elector's Declaration to Surrender Their Mail Ballot

For the Voter:

I hereby declare that I am a qualified registered elector who was issued an absentee or mail-in ballot for this election, but that I have not mailed or cast an absentee or mail-in ballot in this election. Instead, I am hereby remitting my absentee or mail-in ballot and its declaration envelope to the judge of elections at my polling place to be spoiled. I request that my absentee or mail-in ballot be voided, and that I be permitted to sign the poll book and vote a regular ballot.

I verify that the statements made in this declaration are true and correct to the best of my knowledge and belief. I understand that false statements made herein are subject to the criminal penalties of 18 Pa.C.S. § 4904, relating to unsworn falsification to authorities.

(Today's Date) _____

(Printed Name of Elector) _____

(Signature of Elector) _____

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(Address of Elector) _____

For Election Officials Only:

I hereby declare I have received the voter's ballot and envelope containing the voter's declaration from the voter and I am spoiling it and permitting the voter to sign the poll book and vote a regular ballot.

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(Judge of Elections Signature) _____

(Precinct) _____

Instructions after completion: This form should be attached to the voter's surrendered balloting material and returned in the envelope designated for spoiled ballots. Do not forget to check the "BALLOT REMITTED?" option next to the voter's name in the poll book.

RECORD OF ASSISTED VOTERS

City _____

Boro, or _____

Township _____

Ward _____

District _____

AT THE ELECTION OR PRIMARY

held _____, 20__

Judge of Election _____

To be signed and enclosed in the envelope to be returned with other papers to the County Board of Elections

After the polls are closed, sign this form and seal it in the envelope provided.

RECORD OF ASSISTED VOTERS

COPY

If an elector is unable to see or mark the ballot or operate the voting machine or to enter the voting compartment or voting machine booth without assistance, the elector may receive assistance if they complete a declaration of the need for assistance to vote at the polling place.

Any elector who is entitled to receive assistance in voting under the provisions of this section shall be permitted by the judge of election to select a person of the elector's choice to enter the voting compartment or voting machine booth with him to assist him in voting, such assistance to be rendered inside the voting compartment or voting machine booth except that the judge of election, elector's employer or an agent of the employer or an officer or agent of the elector's union shall not be eligible to assist the elector.

In every case of assistance under the provisions of this section, the judge of election shall forthwith enter in writing on the record of assisted voters:

1. The voter's name.
2. A statement of the facts which entitle him to assistance.
3. The name of the person furnishing the assistance.

COPY

INSTRUCTIONS FOR RETURNING AND FILING RECORD OF ASSISTED VOTERS

After the primary or election this Record of Assisted Voters is to be placed in the envelope provided and returned, with other returns, to the County Board of Elections.

This record is not to be opened except upon a written order of a Judge of the Court of Common Pleas except that it may be inspected by any registration commission without a court order. It is also subject to subpoena as other election returns.

WPP159



COMMONWEALTH OF PENNSYLVANIA
DEPARTMENT OF STATE
Harrisburg

COPY

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**STATEMENT OF COMPLAINT – VIOLATIONS OF TITLE III
OF THE HELP AMERICA VOTE ACT OF 2002
(PUBLIC LAW 107-252, 42 U.S.C. § 15301 ET SEQ.)**

Under section 402(a)(2) of the Help America Vote Act of 2002 (HAVA) (42 U.S.C. § 15512(a)(2)) and section 1206.2(a) of the Pennsylvania Election Code (25 P.S. § 3046.2(a)), any person who believes that a violation of any provision of Title III of HAVA (42 U.S.C. §§ 15481-15501) has occurred, is occurring, or is about to occur, may file a complaint with the Department of State, Bureau of Commissions, Elections and Legislation. Complaints made against a local or county official or employee will be processed and considered by the Department of State under section 1206.2(b) of the Election Code (25 P.S. § 3046.2(b)). Complaints made against the Department of State will be processed and considered by the Commonwealth's Office of General Counsel under section 1206.2(c) of the Election Code (25 P.S. § 3046.2(c)).

In order for the Department of State or the Office of General Counsel to initiate complaint proceedings under section 402(a) of HAVA and section 1206.2 of the Election Code to consider possible violations of Title III of HAVA, a complainant must complete both sides of this complaint form. Complaints should be typewritten or clearly printed in black or blue ink. Please state the facts briefly and clearly, and be sure to submit any documents you have to support your complaint.

YOU MUST SIGN THIS FORM, COMPLETE THE PRESCRIBED AFFIDAVIT BEFORE A LICENSED NOTARY PUBLIC OR OTHER PERSONS AUTHORIZED UNDER PENNSYLVANIA LAW TO ADMINISTER OATHS, AND RETURN THE FORM, *WITH TWO COPIES*, TO THE DEPARTMENT OF STATE, BUREAU OF COMMISSIONS, ELECTIONS AND LEGISLATION, 210 North Office Building, Harrisburg, PA 17120.

THIS FORM MUST BE SIGNED UNDER OATH, NOTARIZED, AND FILLED OUT COMPLETELY IN ORDER TO BE PROCESSED. TO ASSURE PROMPT PROCESSING OF THE COMPLAINT, PLEASE FILE THE ORIGINAL AND TWO COPIES OF THE COMPLAINT WITH THE BUREAU OF COMMISSIONS, ELECTIONS AND LEGISLATION

TYPE OF COMPLAINT (PLEASE CHECK ONE):

- ALLEGATIONS MADE AGAINST COUNTY OR LOCAL OFFICIAL (S) OR EMPLOYEE (S)
- ALLEGATIONS MADE AGAINST THE DEPARTMENT OF STATE

A. COMPLAINT INFORMATION

LAST NAME	FIRST NAME	MIDDLE INITIAL	
STREET ADDRESS (Number and Name)			
CITY	COUNTY	STATE	ZIP CODE
TEL. (Include Area Code) (HOME)		(WORK)	

B. COMPLAINANT'S ATTORNEY, IF ANY

LAST NAME	FIRST NAME	MIDDLE INITIAL	
STREET ADDRESS (Number and Name)			
CITY	COUNTY	STATE	ZIP CODE
TEL. (Include Area Code)		FIRM NAME	

C. NAME AND ADDRESS OF WITNESS, IF ANY

LAST NAME	FIRST NAME	MIDDLE INITIAL	
STREET ADDRESS (Number and Name)			
CITY	COUNTY	STATE	ZIP CODE
TEL. (Include Area Code)	If needed, is this witness willing to support your complaint by appearing at a hearing? <input type="checkbox"/> YES <input type="checkbox"/> NO		

D. NAME AND ADDRESS OF SECOND WITNESS, IF ANY

LAST NAME	FIRST NAME	MIDDLE INITIAL	
STREET ADDRESS (Number and Name)			
CITY	COUNTY	STATE	ZIP CODE
TEL. (Include Area Code)	If needed, is this witness willing to support your complaint by appearing at a hearing? <input type="checkbox"/> YES <input type="checkbox"/> NO		

NOTE: If additional witnesses are available, list names, addresses, and other pertinent data in a manner similar to above on 8 1/2" x 11" paper.