Democracy in the Park

Fall 2020

Our Goal

Our goal is for each eligible voter to be able to cast a ballot and have that ballot counted.





Courier Delivery

- Vote yard sign
- Absentee bag
- Safety vests
- Clipboards
- Registration forms

- Pens
- Voter pocket guide
- Disinfectant
- Hand sanitizer
- Election official badges



Code Phrase

Provide code phrase to courier





Mask Up and Sanitize

*Avoid touching eyes, nose, and mouth with unwashed hands or with gloves







Safety Vest

*Helps voters recognize you from afar

*Please empty pockets after use





Social Distancing

*Stay six feet apart as much as possible





Gloves

*Avoid touching face
*Sanitize hands before putting on and after removing

*Do not return used gloves to Clerk's Office





Disinfect After Each Use

*Pens (voters may keep)
*Clipboards





Electioneering

*Prohibited
within 100 feet

*Remove any
political yard
signs





Absentees

Double-Check *Sealed *Voter Signature *Witness Signature *Witness Address





Voter Questions

*Election Official phone line will be staffed

*266-4220





Voter ID Questions

- *Address on ID does not matter when proving your identity
- *WI ID, WI license, passport, or military ID may be expired, if expired after last November election (11-6-2018)
- *WI ID does not need to meet federal REAL ID criteria



WISCONSIN DRIVER LICENSE

UW Student Voter ID

*Wiscard not acceptable

*E-mail <u>wiscard_id@union.wisc.edu</u> from wisc.edu email address, put "Voter ID Needed" in subject line, and attach picture of Wiscard to the email to receive votercompliant ID



Voter Registration

Wisconsin Voter	Re	gistration Application	Please complete legibly Additional instructions on reverse	Please return your completed form to your municipal clerk
Qualifications please check each box if <u>YOU</u> :	1	If you cannot check every box, do <u>NC</u> Are a citizen of the United States Have resided at the address prov 10 consecutive days prior to the currently intend to move	wided below for at least \$\cong \lambda \lambda \cong \lambda \cong \con	8 years old on or before Election Day serving a sentence including arole, probation, or extended felony conviction
Your Name	2	Last	Mide	Suffix (Jr., II, etc.)
About You phone number and email are optional	3	1 1	Phone Number	
The Address Where You Live your residential voting address, which cannot be a P.O. Box	4	Street Address		Apt/Room #
if you do not have a street address, please use the map on the back of this form		Mailing Municipality (if different)	Are you military or permanent overseas voter?	Military Permanent Overseas



Voter Registration

Your Mailing		Street Address (or P.O. Box)
Address if different from above	5	City/State/Country/Zip
Prior Registration Information complete this field if you are updating your registration due to a change in name or address	6	Full Name on Previous Registration
Identification (check the box that applies to you) WI Driver License or ID number required if unexpired and valid.	7	I have an unexpired and valid WI Driver License or WI DOT issued ID. Provide number and expiration date below Expiration Date / / I do not have a valid WI Driver License or WI DOT issued ID Provide the last four digits of your Social Security Number XXX-XX
SSN required if DL/ID not valid or never issued		I have neither a valid WI Driver License/ID nor a Social Security Number (see back for more information and next steps)
Proof of Residence military and permanent overseas voters are <u>not</u> required to provide proof of residence	8	Voters must provide a proof of residence document when registering to vote. Please check this box to affirm that you are providing a copy of a valid form of proof of residence with this application. Examples include: a copy of a valid and unexpired Wisconsin Driver License or ID Card, a utility bill, a paycheck/pay stub, or correspondence from a unit of government (see back of application for additional information and examples)
Signature and Certification	9	By signing below, I hereby certify that, to the best of my knowledge, I am a qualified elector, having resided at the above residential address for at least 10 consecutive days immediately preceding this election, that I have no present intent to move, and I have not voted in this election. I also certify that I am not otherwise disqualified from voting and that all statements on this form are true and correct. If I have provided false information, I may be subject to fine or imprisonment under State and Federal laws X ////////////////////////////////////

Proof of Address

*Just like at the polls

*One document showing the name and address on registration form

*May be electronic

This Section for Official Use Only													
Proof of Residence Type	WI DL	WI ID	UTIL	BANK/ CC	PYCK	STDNT ID	GOV DOC	LSE	GOV ID	EMPL ID	RES CARE	TAX	HMLSS
Proof of Residence Issuing Entity					Proof of Residence #			Date Complete/POR Received			Election Day Voter Number		
What: Who:			4	or 2:			/	/					

Proof of Address

*Unexpired WI driver license/ID
*Utility bill from the last 90 days
*Bank/credit union statement
*Paycheck
*Residential lease

*****Government document

*Affidavit of homeless services









What – Who - 4 or 2

		_								
Proof of Resid	lence Type	WI DL	WI ID	UTIL	BANK/ CC	PYCK	STDNT ID	GOV DOC		
	Proof of Residence Issuing Entity						Proof of Residence #			
What:	U	Wł	io: W	G&i	E	4 or 2:	142	3		

(L	SE	GOV ID	EMPL ID	RES CARE	TAX	HMLSS	
Date	Comple /	te/POR R /	eceived	Election D	ay Voter	Number	
X Abraham Lincoln							

Acceptable Proof of Address

- A Affidavit from agency providing homeless services
- B Bank/Credit Union statement
- C Care facility intake document
- G Government document/check
- H Housing list from UW/Edgewood
- P Paycheck
- R Residential lease (current)
- S Student ID & Proof of Enrollment
- T Tax bill (this year or last year)
- U Utility bill (water, gas, electric, cable, internet, cell, landline)
- W WI driver license/ID (unexpired)



Interpretation

Need an Interpreter for a City of Madison Voter?

- 1. Dial 1-866-874-3972
- 2. Enter Client ID 509626
- 3. Indicate Language
 - 1 for Spanish
 - 2 For all others (clearly state the language)
 - 0 If you don't know the language needed
- 4. Enter Agency Code 13, followed by #

At the beginning of the call, briefly tell the interpreter the nature of the call. Then speak directly to the limited English proficient individual, pausing for the interpreter at the end of each complete thought. Please note, to ensure accuracy, the interpreter may sometimes ask for clarification or repetition.





Courier

- *Courier will provide code phrase
- *Count absentees
- *Complete chain-ofcustody
- *Seal ballot bag & document seal serial number





Thank You!



