

DECLARATION OF TRUTH

I, _____, the undersigned, make this Declaration of Truth of my own free will, as a member of the voting population of the Great State of Texas, and I hereby affirm, under the laws of the United States of America, and of this state, that I am of legal age and of sound mind and hereby attest that the statements, averments, and information outlined in this Declaration of Truth are true and correct to the best of my knowledge.

1. I am a registered voter and resident of the city of _____, in _____ County, Texas.
2. My residential address is: _____
3. My phone number is: _____
4. My email is: _____
5. My VUID or DOB is: _____
6. Due to Dallas County's participation in the Texas Secretary of State's Countywide Early Voting and Countywide Polling Place Program, I was not assigned a specific polling location, being able to vote at any polling location in Dallas County. As a result, on _____, 20____, at approximately _____, I attempted to vote at _____ Vote Center.
7. I believe I was disenfranchised, my vote diluted, my vote not counted, and that my civil rights were violated when I attempted to vote because (*initial any and all that apply*):
 - ___ I was provided a ballot by mail that I did not request and/or qualify for
 - ___ I was provided and voted on ballot that did not reflect proper ballot style
 - ___ I was turned away from voting after ePollbooks spoiled my ballot(s)
 - ___ I was turned away from voting when not provided a provisional ballot
 - ___ I noticed that the printed ballot did not reflect my ballot selection
 - ___ I could not confirm selections on printed ballot because _____
 - ___ I was able to vote on the same office or measure more than once
 - ___ I voted and my name is not on Dallas County Public Early Voting RosterOther: _____

8. I declare under penalty of perjury under the laws of Texas that the foregoing is true and correct.

The above stated positions are true, factual, lawful, and constitutionally ordained.

Declarant further sayeth naught. All rights reserved.

_____	x _____	_____
Printed Name	Signature	Date