



**SHIRLEY N. WEBER Ph.D.** | SECRETARY OF STATE | STATE OF CALIFORNIA  
ELECTIONS DIVISION  
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August 5, 2021

County Clerk/Registrar of Voters (CC/ROV) Memorandum # 21114

**TO:** All County Clerks/Registrars of Voters

**FROM:** /s/ Mike Somers  
Election Cybersecurity Manager

**RE:** California Gubernatorial Recall Election: Election Materials – Reporting of Errors

In order to ensure all elections are efficiently conducted and state election law is consistently and uniformly enforced, counties are asked to report any substantive errors made in the production or distribution of election-related materials provided to voters (such as ballots, county voter information guides, inserts, outreach materials, etc.) for the California Gubernatorial Recall Election as they are discovered. This will allow the Secretary of State's office to provide guidance and share any best practices or lessons learned with all county elections officials. A fillable form has been provided along with this CCROV to facilitate ease of reporting.

When reporting errors, please provide the following:

- Description of Error
- Type of Error (such as typographical, missing information, incorrect information, translations, mailing related, technical, etc.)
- Number of registered voters in the jurisdiction
- Number and percentage of affected voters
- Corrective action taken

Please return the completed error reporting form to [msomers@sos.ca.gov](mailto:msomers@sos.ca.gov).

By sharing of errors and their solutions election officials will assist in mitigating and/or preventing future errors throughout the state. Should you have any questions, please feel free to contact me at [msomers@sos.ca.gov](mailto:msomers@sos.ca.gov) or (916) 695-1563.

County: \_\_\_\_\_

**September 14 Gubernatorial Recall  
Election Material Error Report**

| Error Description | Date | Error Type | Total Number of Registered Voters | Number and Percentage of Affected Voters | Corrective Action Taken |
|-------------------|------|------------|-----------------------------------|--|-------------------------|
|                   |      |            |                                   |  |                         |
|                   |      |            |                                   |  |                         |
|                   |      |            |                                   |  |                         |
|                   |      |            |                                   |  |                         |

Please return this form to [msomers@sos.ca.gov](mailto:msomers@sos.ca.gov) upon completion.