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June 30, 2025

County Clerk/Registrar of Voters (CC/ROV) Memorandum #25049

TO: All County Clerks/Registrars of Voters

FROM: /s/ Mandy Wright
VRC-VNC Coordinator

RE: Voter Registration: Postage Reimbursement and Replenishment Claims
(FY 2024/2025 – 4th Quarter)

The attached Voter Registration: Postage Reimbursement and Replenishment Claims package includes guidelines, a quarterly postage claims deadline schedule, a postage reimbursement claim form for mailings sent to voters, a postage replenishment claim form for mailings received from voters through the business reply mail account, and a monthly activity report.

AB 107 (Ch. 22, Statutes of 2024) continued several elections-related mandate suspensions for the 2024-2025 fiscal year. One of the suspended mandates is Elections Code section 2105 which requires county elections officials to design and conduct outreach efforts to identify unregistered, eligible citizens and register them to vote. Therefore, the Secretary of State will not reimburse counties for the mailing of blank voter registration cards mailed for outreach activities under Section 2164(a)(4) during the current fiscal year (July 1, 2024 – June 30, 2025).

Any additional voter registration card-related postage costs (such as when a card is received unsealed) will continue to be reimbursed or covered through the replenishment of your postage account.

In order to timely process postage reimbursement and replenishment claims for voter registration activities performed during the 4th quarter of fiscal year 2024-2025, please complete the enclosed quarterly postage reporting forms and return them to our office by **August 1, 2025.**

Our office will accept the attached electronic fillable forms with an electronic signature. The forms can be submitted by **email or fax**. It will not be necessary to mail the original forms to our office for processing.

If you have any questions, please contact me by email at VRC-VNC@sos.ca.gov or by calling (916) 695-1561.

Attachment

VOTER REGISTRATION
Postage Reimbursement and Replenishment Claims

Voter Registration Postage Reimbursement and Replenishment Claims Package includes the following:

- Voter Registration Postage Claim Guidelines
- Voter Registration Postage Reimbursement Claim Form
- Voter Registration Postage Replenishment Claim Form
- Voter Registration Postage Claim – Monthly Activity Report

VOTER REGISTRATION POSTAGE CLAIM GUIDELINES

In order to timely process postage reimbursement and replenishment claims for postage costs related to voter registration activities for each quarter of a fiscal year, please complete the Voter Registration Postage Reimbursement Claim Form, Voter Registration Postage Replenishment Claim Form, and the Voter Registration Postage Claim – Monthly Activity Report and return to the Secretary of State by the claim's deadline.

Postage Quarter

| | |
|-------------|---------------------------|
| 1st Quarter | (July 1 – September 30) |
| 2nd Quarter | (October 1 – December 31) |
| 3rd Quarter | (January 1 – March 31) |
| 4th Quarter | (April 1 – June 30) |

Claims Deadline

| |
|------------------|
| November 1, 2024 |
| February 1, 2025 |
| May 1, 2025 |
| August 1, 2025 |

AB 107 (Ch. 22, Statutes of 2024) suspended several elections-related mandates for the 2024-2025 fiscal year. One of the suspended mandates is Elections Code section 2105 which requires county elections officials to design and conduct outreach efforts to identify unregistered, eligible citizens and register them to vote. Therefore, the Secretary of State will not be reimbursing counties for the mailing of blank voter registration cards mailed for outreach activities under Section 2164(a)(4) during the current fiscal year (July 1, 2024 – June 30, 2025).

VOTER REGISTRATION POSTAGE REIMBURSEMENT AND REPLENISHMENT CLAIMS

1. Reimbursement for Mailing Voter Registration Cards (VRCs)

The Secretary of State is required to reimburse county elections offices for postage paid on voter registration cards:

| REIMBURSEMENT ALLOWANCE | ELECTIONS CODE SECTION |
|---|------------------------|
| Mailed to voters per their request pursuant to § 2158(c) | 2164(a)(3) |
| *Mailed per outreach activities pursuant to § 2105 | 2164(a)(4) |
| Mailed to obtain information required to complete a registration form pursuant to § 2153(c) | 2164(a)(1) |

* AB 101 (Ch. 22, Statutes of 2024) has suspended the reimbursement for postage related to outreach activities. There will be no reimbursement for any postage paid on registration cards for outreach activities for the 2024-25 fiscal year.

The quantities and costs for postage paid for mailing voter registration cards under these code sections are to be itemized on the quarterly **Voter Registration Postage Reimbursement Claim Form** and submitted to the Secretary of State by the claim's deadline for that fiscal quarter.

2. Reimbursement for Mailing Voter Notification Cards (VNCs)

The Secretary of State is required to reimburse county elections offices for postage paid on voter notification cards:

| REIMBURSEMENT ALLOWANCE | ELECTIONS CODE SECTION |
|--|------------------------|
| Mailed to new registrants pursuant to § 2153 | 2164(a)(1) |
| Mailed per USPS Address Correction pursuant to § 2153(c) | 2164(a)(1) |

The quantities and costs for postage paid for mailing voter notification cards under these code sections are to be itemized on the quarterly **Voter Registration Postage Reimbursement Claim Form** and submitted to the Secretary of State by the claim's deadline for that fiscal quarter.

3. Replenishment of Postage Account for Mailing Voter Registration Cards

The Secretary of State is required to replenish the local county business reply mail account for the return of county specific voter registration cards that are mailed to the county elections office.

| REPLENISHMENT ALLOWANCE | ELECTIONS CODE SECTION |
|--|------------------------|
| Mailed by voter to county pursuant to § 2157(a)(7) | 2164(a)(2) |

The number of forms and the cost associated with the local county business reply mail account for the return of county specific voter registration cards to the county elections office should be itemized on the quarterly **Voter Registration Postage Replenishment Claim Form** and submitted to the Secretary of State by the claim's deadline for that fiscal quarter.

VOTER REGISTRATION MONTHLY ACTIVITY REPORT

The Secretary of State is compiling monthly data on postage claims within each quarter. The **Voter Registration Postage Claim – Monthly Activity Report** should be completed and submitted with each claim. The Monthly Activity Report Quarter Totals must balance with the totals itemized on the Postage Reimbursement Claim and the Postage Replenishment Claim forms.

FILING OF CLAIMS

Our office will accept the attached electronic fillable forms with an electronic signature. The forms can be submitted by email or fax. It is not necessary to mail the original forms to our office for processing.

To submit the Voter Registration Postage Reimbursement and Replenishment Claims package by email, fax, or mail, please use the following contact information:

Email: VRC-VNC@sos.ca.gov

OR

Fax: (916) 653-3214

OR

California Secretary of State
Elections Division
Attn: VRC-VNC Coordinator
1500 11th Street, Fifth Floor
Sacramento, CA 95814

**FOURTH QUARTER
VOTER REGISTRATION POSTAGE REIMBURSEMENT CLAIM FORM**

4th Quarter (April 1 - June 30)

FISCAL YEAR _____

Elections Code section 2164 requires the Secretary of State to reimburse counties postage costs for mailing voter registration and voter notification cards as referenced below.

County: _____

Prepared By: _____

Telephone No: _____

Email: _____

Not necessary to reimburse postage costs at this time. Please complete and sign form if county is not requesting reimbursement.

VOTER REGISTRATION CARDS (VRCs)

| | Quantity | Postage Rate/ Actual Cost | TOTALS |
|----------------------------|----------|------------------------------|----------|
| Mailed per Voters Request: | _____ X | \$ _____ | \$ _____ |
| (EC § 2158(c)) | _____ X | \$ _____ | \$ _____ |
| | | Sub-Total | \$ _____ |

| | | | |
|--|--|--|-------|
| | | | _____ |
| | | | _____ |
| | | | _____ |

| | | | |
|----------------------------|---------|-----------|----------|
| Mailed per Incomplete VRC: | _____ X | \$ _____ | \$ _____ |
| (EC § 2153) | _____ X | \$ _____ | \$ _____ |
| | | Sub-Total | \$ _____ |

TOTAL 1: \$ _____

***AB 107 has suspended the reimbursement for postage related to outreach activities. There will be no reimbursement for any postage paid on registration cards for outreach activities for the 2024-2025 fiscal year.**

VOTER NOTIFICATION CARDS (VNCs)

| | | | |
|----------------------------|---------|-----------|----------|
| Mailed to New Registrants: | _____ X | \$ _____ | \$ _____ |
| (EC § 2153) | _____ X | \$ _____ | \$ _____ |
| | | Sub-Total | \$ _____ |

| | | | |
|--------------------------|---------|-----------|----------|
| USPS Address Correction: | _____ X | \$ _____ | \$ _____ |
| (EC § 2153(c)) | _____ X | \$ _____ | \$ _____ |
| | | Sub-Total | \$ _____ |

TOTAL 2: \$ _____

GRAND TOTAL (1 & 2): \$ _____

I certify that this record is accurate to the best of my knowledge and that documentation is on file in my office to substantiate these figures. Please make check payable to this County and direct it to:

County Name _____

County Elections Official _____

Business Address _____

Date _____

City, State, Zip Code _____

**FOURTH QUARTER
VOTER REGISTRATION POSTAGE REPLENISHMENT CLAIM FORM**

FISCAL YEAR _____

4th Quarter (April 1 - June 30)

Authority for replenishment of postal account funds
for voter registration cards mailed by voter to county
elections office:

Election Code §§ 2157(a)(8), 2164(a)(2)

**BUSINESS REPLY MAIL (BRM)
PERMIT # 85814**

County: _____

Prepared By: _____

Telephone No: _____

Email: _____

Not necessary to replenish account at this time. Please complete and sign form if county is not requesting replenishment.

Prior Quarterly Ending Balance..... \$ _____

Prior Deposits Received from Secretary of State.....\$ _____

TOTAL \$ _____

Number of Affidavits Received through BRMA..... _____

Postage Rate..... X _____

New Quarterly Balance in Account..... \$ _____

Please Replenish Account with a Check in the Amount of... \$ _____

Please Send Check to:

Please Make Check Payable to:

County Elections Office Mailing Address:

Mailing Address:

The number of items reported above represents the actual number of affidavits received through the business reply mail account by this office.

The total cost reported above represents the amount reportedly charged to the account by your Postmaster. Please provide the last business reply mail trust account invoice received by your office. I certify that this record is accurate to the best of my knowledge and that documentation is on file in my office to substantiate these figures.

County Elections Official

Date

**FOURTH QUARTER
VOTER REGISTRATION POSTAGE CLAIM - MONTHLY ACTIVITY REPORT**

FISCAL YEAR _____

4th Quarter (April 1 - June 30)

This form must be completed even if your county is not requesting reimbursement or replenishment.

County: _____

Prepared By: _____

Telephone No: _____

Email: _____

REIMBURSEMENT CLAIM

| Voter Registration Activity | APRIL | MAY | JUNE | QUARTER TOTAL |
|---|--------------|------------|-------------|----------------------|
| *Number Mailed Per Voter Request (EC §2158 (c)) | | | | |
| | | | | |
| *Number Mailed per Incomplete VRC (EC § 2153) | | | | |
| | | | | |
| Voter Notification Activity | APRIL | MAY | JUNE | QUARTER TOTAL |
| *Number Mailed to New Registrants (EC §§ 2153 & 2164(a)(1)) | | | | |
| *Number of USPS Address Corrections (EC § 2153 (c)) | | | | |

***The Quarter Total reported must balance the total itemized on the Reimbursement Claim Form.**

****AB 107 has suspended the reimbursement for postage related to outreach activities. There will be no reimbursement for any postage paid on registration cards for outreach activities for the 2024-2025 fiscal year.**

REPLENISHMENT CLAIM

| Voter Registration Activity | APRIL | MAY | JUNE | QUARTER TOTAL |
|--|--------------|------------|-------------|----------------------|
| ***Number of Affidavits Received through the Business Reply Mail Permit #85814 (EC §§ 2157(a)(8) & 2164(a)(2)) | | | | |

*****The Quarter Total reported must balance the total itemized on the Replenishment Claim Form.**