

DEPARTMENT OF SOCIAL SERVICES
744 P Street, Sacramento, CA 95814



May 8, 1996

ALL-COUNTY LETTER NO. 96-21

TO: ALL-COUNTY WELFARE DIRECTORS
TO: ALL-COUNTY FISCAL OFFICERS

Reason For This Transmittal

- State Law Change
- Federal Law or Regulation Change
- Court Order or Settlement Agreement
- Clarification Requested by one or More Counties
- Initiated by CDSS

SUBJECT: IN-HOME SUPPORTIVE SERVICES -
IMPLEMENTATION OF NATIONAL VOTER REGISTRATION ACT
OF 1993

REFERENCE: ALL COUNTY INFORMATION NOTICE (ACIN) NO. I-46-94, ALL
COUNTY LETTER NO. 95-26, ACIN NO. I-56-95, ALL COUNTY
LETTER NO. 96-01, ACIN NO. I-17-96

This letter provides implementation instructions on the National Voter Registration Act (NVRA) of 1993 that requires voter registration services at all public assistance offices. The NVRA was effective on January 1, 1995. Originally the NVRA was implemented in the Aid to Families with Dependent Children; Food Stamp; Medi-Cal; and Women, Infants and Children programs. It has subsequently been determined that NVRA services have not been adequately provided to applicants and recipients in the In-Home Supportive Services program (IHSS) through the Social Security Administration or the Medi-Cal program as anticipated. Therefore, specific instructions applicable to IHSS applicants and recipients were deemed necessary. Counties have 45 days from the date of this letter to implement these instructions.

1. Forms

The Secretary of State (SOS) or county registrar provides all forms and materials necessary for the voter registration process. There are two forms: an instruction and declination form entitled "WOULD YOU LIKE TO REGISTER TO VOTE?" and the standard Voter Registration form. The declination form provides questions and information on voter registration and includes an acknowledgment line to be signed by the client. Camera ready translations of this form in Cambodian, Chinese, Farsi, Hmong, Japanese, Korean, Laotian, Romanian, Russian, Spanish, Tagolog, and Vietnamese were enclosed with ACIN I-19-96. Workers must take the appropriate forms with them when interviewing applicants and

recipients in their homes. The SOS provided procedural information on implementation of the NVRA to all county registrar of voters on April 22, 1994.

To assist designated voter registration offices with implementation, the SOS distributed a training manual and video to all counties. To obtain copies of these training materials, contact the county registrar of voters.

2. CWD Procedures

IHSS staff must provide the instruction and declination form and the Voter Registration form to IHSS clients during any face to face assessment or reassessment, or whenever the recipient submits a change of address form in the IHSS office. If after reviewing the declination form the client does not want to sign the form, the IHSS worker will complete the bottom portion of the form and indicate that the client did not sign the form. The instruction and declination form should be retained in the case file.

IHSS staff must provide assistance in completing the Voter Registration form if requested by the applicant or recipient. The NVRA requires staff to provide the same level of assistance as is provided in completing IHSS program forms. The NVRA prohibits any person who provides voter registration services from:

- Seeking to influence an applicant's political preference or party registration;
- Displaying any political preference, making any statement or taking any action to discourage registration; or
- Leaving an applicant with the impression that a decision to register or not to register has any bearing on the availability of program services or benefits.

The client may take and mail the pre-addressed, postage-paid, Voter Registration form or the client may leave the form with the county for transmittal to the county registrar of voters. All completed forms accepted at the county office, or in the client's home, must be mailed to the county registrar of voters within ten days after the date of the acceptance. However, if the registration form is accepted within five days before the last day for registration to vote in an election, the form must be transmitted no later than five days after the date of acceptance. The SOS suggests that the forms be mailed within five days in all cases in order to avoid confusion and delays. Federally mandated confidentiality standards require that the registration forms and all other voter registration materials be separate from IHSS program forms.

3. Flagging

The state plan of implementation requires "flagging" questionable registration forms. The enclosed "Social Services Agency Flagging Procedures" was jointly agreed to by the SOS and the participating social services agencies. The registration form must be "flagged" if county staff have specific knowledge that the applicant does not meet voter eligibility requirements. The decision on registration is made by the county registrar of voters or the SOS.

4. Fiscal Instructions

A. Time Study Instructions

Effective with the April through June 1996 quarter, caseworkers and other staff will record these activities to the applicable timestudy, (DFA 10, Generic Time Study, or the DFA 7, Support Staff Time Report) as follows:

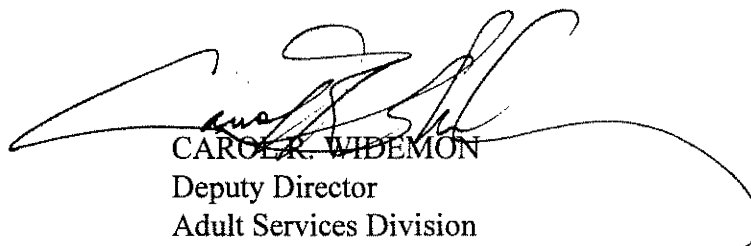
Social services workers record time spent performing these activities on the DFA 10 to Code 1030, IHSS - PCSP for PCSP cases; for Residual cases, record the time to Code 1040, IHSS - NON-HR/NON-PCSP. Clerical and administrative staff record time spent performing these activities on the DFA 7 to the level specified in the county Support Staff Time Reporting Plan (SSTRP). In counties which do not have an SSTRP, refer to County Fiscal Letter No. 95/96-06. Homemaker staff record time spent performing these activities on the DFA 7 to program identifier number (PIN) 103068 for PCSP cases; for Residual cases, record time to PIN 104068.

B. Claiming Instructions

Report NVRA costs for PCSP cases to Program 103, IHSS-PCSP/HR; report NVRA costs for Residual cases to Program 104, IHSS-NON-HR/Non-PCSP. Allowable costs include casework salaries and benefits, allocable support costs, direct costs (homemaker costs), electronic data processing, and staff development. Sharing ratios are 0/35/50/15 (Federal Welfare/State Welfare/Health/County) for Program 103 and 0/70/0/30 (Federal Welfare/State Welfare/Health/County) for Program 104.

Any fiscal questions should be directed to the Fiscal Policy Bureau at (916) 657-3440. Please contact your assigned Adult Services Policy analyst at (916) 229-4586 if you have any policy questions concerning this letter.

Sincerely,



CAROL R. WIDEMON
Deputy Director
Adult Services Division

Enclosures

c: CWDA

WOULD YOU LIKE TO REGISTER TO VOTE?

TO REGISTER TO VOTE IN CALIFORNIA, YOU:

1. Must be a citizen of the United States;
2. Must live in the State of California;
3. Must be at least 18 years old by the date of the next election, and;
4. Must not currently be in prison or on parole for the conviction of a felony, or be judged by a court to be mentally incompetent to vote.

WARNING: Under state and federal law, it is a crime to submit a voter registration affidavit if you know you are not eligible to register to vote.

IMPORTANT NOTICES

1. Applying to register or declining to register to vote will not affect the amount of assistance that you will be provided by this agency.
2. If you would like help in filling out the voter registration application form, we will help you. It's your choice. You may fill out the application form in private.
3. If you decline to register to vote here today, that information is confidential and may not be used for any purpose other than voter registration. If you do register to vote here today, that information, including the office at which you are registering, is also confidential.
4. If you believe that someone has interfered with your right to register or to decline to register to vote, your right to privacy in deciding whether to register or in applying to register to vote, or your right to choose your own political party or other political preference, you may file a complaint with the Secretary of State by calling toll-free 800-345-VOTE or write to: Secretary of State, 1500 11th Street, Sacramento, CA, 95814.
5. If you move to a new address, or if you change your name or want to change your political party, you must fill out a new voter registration form.

Would you like to apply to register to vote here today?

(Check One)

- I am already registered to vote at my current address, or I am not eligible to register to vote, and do not need an application to register to vote.
- YES. I would like to register to vote. (Please fill out the attached form)
- NO. I do not want to register to vote.

(NOTE: IF YOU DO NOT CHECK ANY BOX, YOU WILL BE CONSIDERED TO HAVE DECIDED NOT TO REGISTER TO VOTE AT THIS TIME.)

Please sign your name here: _____
SIGNATURE DATE

This form will be retained with this agency.

(For Agency Use Only)

Voter registration form completed: YES _____ NO _____ DECLINED _____
If applicant wanted to register, form was: GIVEN TO CLIENT _____ MAILED _____
If client declined to register but failed to sign declination form, check here _____
Applicant's Name _____
Employee Initials _____ Date _____

SOCIAL SERVICES AGENCIES FLAGGING PROCEDURES

UNIFORM PROCEDURES FOR "FLAGGING" QUESTIONABLE VOTER REGISTRATION FORMS EXECUTED BY CLIENTS OF SOCIAL SERVICES, REHABILITATION, DEVELOPMENTAL SERVICES, FRANCHISE TAX BOARD, BOARD OF EQUALIZATION, AND WOMEN/INFANTS/CHILDREN PROGRAM OFFICES

The court-ordered plan for implementation of the National Voter Registration Act (NVRA) directed the Secretary of State and state social services agencies to develop procedures for "flagging" questionable registration applications in order to ensure the Act's purposes are met in the area of voter eligibility. The implementation plan directed "flagging" of completed voter registration cards in cases "when the **employee has specific knowledge** that the applicant does not meet voter eligibility requirements, including citizenship."

The following procedures have been developed to meet the NVRA's legal requirements that potentially ineligible registrants be brought to the attention of elections officials. The procedures should be easy to administer, are consistent with the Act's confidentiality mandates, and are intended to safeguard agency personnel from danger, harassment or retaliation from applicants who workers believe may not be eligible to legally register to vote. Importantly, they also establish a uniform statewide standard easily administered by staff in all 58 counties.

Since it is a crime under the NVRA for any person to knowingly and wilfully submit a voter registration application that is known by the person to be materially false, fictitious or fraudulent, "flagging" is intended to protect agency personnel and the integrity of the state's voter files.

The following are guidelines for "flagging" registrations when an agency employee, at the time assistance is provided to the client, knows the client is not eligible to register to vote and that the client has provided false information on the registration form.

The employee providing voter registration assistance at designated agencies should **"flag" only those cards known to contain false information at the time assistance is provided. No search of files should be done** to determine or verify a registrant's eligibility to register to vote. Please note, however, that **no applicant is to be refused the right to complete the registration form.** Registrants whose forms are "flagged" will still be added to voter rolls by county elections officials and then forwarded to the Secretary of State's Office for investigation to determine eligibility and the necessity of any follow-up action to remove an ineligible individual from the voter rolls.

A self-sticking "flag", removable yet secure for marking pages, should be attached to the completed form; it is suggested that employees attach this "flag" when the form is completed and returned to staff for transmittal to the county elections offices (immediately after the applicant has left the area or completed the transaction with the agency). **These markers are the color-tipped tape "flags" which have clear tape at one end and a colored "flag" at the other, and which measure approximately 1" by 1-3/4".** The yellow square sticky pads are not to be used to "flag" these questionable forms. **Employees may NOT make ANY permanent marks on the registration forms.**

The origin of the registration form (be it a social service, rehabilitation or developmental services agency, the Franchise Tax Board, the Board of Equalization, or other non-DMV agency) **must be confidentially protected**, so all involved agencies will use the same procedures and use of this tape "flag" will not allow anyone to link the registration form's origin to a particular office or agency. When the flag is removed by elections officials, the **form will not be identifiable as having been previously "flagged"**.

If the applicant checks the box on the card that he or she is not a citizen or if the applicant is not yet 18 years old but fills in his or her correct birthdate on a voter registration form, the form need **NOT be "flagged"** because the information is not false and the elections officials can make the appropriate determination. **If the registrant chooses to take the card to complete and mail at a later time, there likewise is no requirement to attempt to "flag" or otherwise report such actions.**

You are also reminded that **agency employees are NOT required to sign as having assisted** the applicant in completion of the card (box #13).

Finally, it would enhance the integrity of this "flagging" process if **"questionable" (i.e., "flagged") registration forms could be segregated from the others when transmitting them to the county elections officials.** By putting them together with a rubber band, paper clip, or whatever tool is most convenient and "batching" them, if a "flag" becomes detached from the form during transit, elections officials will still know the registration is one needing special review.

Your prompt implementation of these new procedures is appreciated. If you have any questions, feel free to discuss them with your local elections official or call us.

flag.doc

ARE YOU A U.S. CITIZEN? Yes No (If No, Don't Fill Out This Form) Use Pen—Please Print Clearly

1 Mr. FIRST NAME MIDDLE NAME LAST NAME
 Mrs.
 Miss
 Ms.

2 ADDRESS Where You Live (Number, Street, Apartment No.) City County ZIP Code

3 If No Street Address, Describe Where You Live: (Cross Streets, Route, Box, Section, Township, Range, Etc.)

4 ADDRESS Where You Get Your Mail (If Different From #2) City State ZIP Code

5 DATE OF BIRTH (month - day - year) 6 PLACE OF BIRTH (State or Foreign Country)

7 CA DRIVER'S LICENSE OR ID CARD # 8 TELEPHONE ()

PARTY REGISTRATION—Check one box (FOR OFFICE USE ONLY)

- American Independent Party
- Democratic Party
- Green Party
- Libertarian Party
- 9 Natural Law Party 10
- Peace and Freedom Party
- Reform Party
- Republican Party
- Decline to State
- Other (Specify) _____

OPTIONAL SURVEY: Can you help in the following area(s)
 _____ Polling Place Worker
 _____ Polling Place Site

HAVE YOU EVER BEEN REGISTERED TO VOTE? Yes No

If Yes, give information from last voter registration form.

11 Name _____
 Address _____
 City _____ County _____ State _____
 Political Party _____

WARNING: It is a felony if you sign this statement even though you know it is untrue, you can be fined and jailed for up to four years.

VOTER DECLARATION—Read and Sign Below.

- I am a U.S. Citizen, I will be at least 18 years old on or before the next election, I am not in prison or on parole for a felony conviction.
- I certify under penalty of perjury under the laws of the State of California that all the information on this form is true and correct.

12 SIGNATURE—Sign in box below.

DATE 59 AL 361003

If someone helps fill out or keeps this form, see #13 instructions below.

13 (1) _____ (2) () _____
 (3) _____
 (4) _____ (5) ____/____/____
 (6) _____ (7) () _____

INSTRUCTIONS FOR COMPLETING THE REGISTRATION FORM

TYPE OR PRINT IN INK: Read instructions and information carefully. Only your "signature" should be written; all other information should be printed or typed.

WARNING--STATEMENT UNDER PENALTY OF PERJURY: Be sure you read the warning and voter declaration above the signature line before signing. You must also date the form. If you are 17 years old, you may register to vote provided you will be 18 years old on or before the date of the next election.

- 1 Print your full name--first, middle, last. Check box for Mr., Mrs., Miss or Ms. (Optional)
- 2 Print your complete ADDRESS (not P.O. box) including city, county and ZIP code. Please include North, South, East, West, if appropriate, and whether it is a street, avenue, road, lane, drive, way, circle, etc.
- 3 If no street address, describe where you live: (cross streets, route, box, section, township, range, etc.)
- 4 Print the address where you get your mail if it is different from the address where you live. Be sure to give the route or box number, if any, and ZIP code.
- 5 Print your complete date of birth (month/day/year).
- 6 Print the name of the state in U.S.A. or foreign country where you were born.
- 7 No person shall be denied the right to register because of his or her failure to furnish a California driver's license or identification card number. (Optional)
- 8 Telephone number is optional. This number becomes public record if given. Please include Area Code.
- 9 **POLITICAL PARTY:** Place an "X" in the box preceding your choice of a qualified political party, "Decline to State", or "Other". If you mark "Other", you may print the name of an unqualified political party. All properly registered voters may vote for any candidate of their choice for each office at any primary election regardless of political affiliation. (Pursuant to Prop 198 of 1996)
- 10 Not applicable in this county (for official use only).
- 11 **PRIOR REGISTRATION:** If you have ever been registered to vote, complete this portion to the best of your knowledge concerning your last voter registration.
- 12 Sign your name as printed in Box 1. Date the form in the space below the signature box.
- 13 Any person who is paid to take back and turn in this completed form must personally affix in Box 13 his/her name (1), phone number (2), address (3), signature (4), date (5) and the name (6) and phone number (7) of the person, company, or organization paying. Any person who helps fill out this form must include in Box 13 his/her signature (4) and date (5). Any person who takes back the completed form to turn it in for you must also fill out the receipt stub (below) and give it to you.

RETURN VOTER REGISTRATION FORM TO COUNTY CLERK OR REGISTRAR OF VOTERS:

- If you return this card by mail, it must be postmarked at least 29 days before the next election for your registration to be valid for that election.
- When you accept this card from someone who has filled it out, you must deliver it or mail it within 3 days, or before the registration deadline, to the address on the other side of this card.

| | | | | |
|---|---|---|--|--|
| ARE YOU A U.S. CITIZEN? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <small>If No, Don't Fill Out This Form Use Pen--Please Print Clearly</small> | | | | |
| VOTER REGISTRATION FORM STATE OF CALIFORNIA | 1 | Mr <input type="checkbox"/> Mrs <input type="checkbox"/> Miss <input type="checkbox"/> Ms <input type="checkbox"/> FIRST NAME MIDDLE NAME LAST NAME John Q. Voter | | |
| | 2 | ADDRESS Where you Live (Number, Street, Apartment No.) 1234 Your Street | City: Your City County: Your County ZIP Code: 00000 | |
| | 3 | If No Street Address, Describe Where You Live: (Cross Streets, Route, Box, Section, Township, Range, Etc.) | | |
| | 4 | ADDRESS Where You Get Your Mail (If Different From #2) | City: _____ State: _____ ZIP Code: _____ | |
| | 5 | DATE OF BIRTH (month - day - year) 01-01-50 | 6 PLACE OF BIRTH (State or Foreign Country) CA | WARNING: It is a felony if you sign this statement even though you know it is untrue; you can be fined and jailed for up to four years. VOTER DECLARATION--Read and Sign Below. • I am a U.S. Citizen. I will be at least 18 years old on or before the next election. I am not in prison or on parole for a felony conviction. • I certify under penalty of perjury under the laws of the State of California that all the information on this form is true and correct. |
| | 7 | CA DRIVER'S LICENSE OR ID CARD # N0123456 | 8 TELEPHONE (000) 123-4567 | |
| | 9 PARTY REGISTRATION--Check one box <input type="checkbox"/> American Independent Party <input type="checkbox"/> Democratic Party <input type="checkbox"/> Green Party <input type="checkbox"/> Libertarian Party <input type="checkbox"/> Natural Law Party <input type="checkbox"/> Peace and Freedom Party <input type="checkbox"/> Reform Party <input type="checkbox"/> Republican Party <input type="checkbox"/> Decline to State <input type="checkbox"/> Other (Specify) _____ | | 10 OPTIONAL SURVEY: Can you help in the following area(s) <input type="checkbox"/> Polling Place Worker <input type="checkbox"/> Polling Place Site | |
| | 11 | HAVE YOU EVER BEEN REGISTERED TO VOTE? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No If Yes, give information from last voter registration form. Name: John Q. Voter Address: 1234 Previous Street City: Previous Town County: Prev. Co. State: CA Political Party: Unknown | | 12 SIGNATURE--Sign in box below. X <i>John Q. Voter</i> |
| | | | DATE: 01/01/94 59 AL | If someone helps fill out or keeps this form, see #13 instructions below. |
| | | | (1) _____ (2) _____ (3) _____ (4) _____ (5) _____ (6) _____ (7) _____ | 13 |

| | | |
|--|--|---|
| <p style="text-align: center;">REGISTRATION FORM RECEIPT</p> <p>ATTENTION VOTER: If you do not mail your form personally, have this receipt signed by the person who takes it from you and keep it until you receive your Voter Notification Card. This receipt will be used to investigate any cases in which that person does not mail or deliver the form to the County Clerk or Registrar of Voters within the time limit required by law.</p> | <p>FOR ELECTIONS INFORMATION CONTACT: YOUR LOCAL COUNTY CLERK OR REGISTRAR OF VOTERS.</p> | <p>Person Receiving Registration Form From Voter</p> <p>SIGNATURE _____</p> <p>Address _____</p> <p>Telephone No. of person or organization paying for registration (if any). _____ Date _____</p> |
| | | 59 AL 361003 |