



County of San Diego

REGISTRAR OF VOTERS

5201 Ruffin Road, Suite I, San Diego, California 92123-1693

MICHAEL VU
Registrar of Voters

CYNTHIA PAES
Assistant Registrar

Office: (858) 565-5800
Fax: (858) 694-2955
TDD: (858) 694-3441
Toll Free: (800) 696-0136

June 19, 2013

Officer Calimquim
U.S. Citizenship and Immigration Services
P.O. Box 1517
Chula Vista CA 91912
ATTN: ERC

RE: Fil

Dear Officer Calimquim,

This letter is to confirm that Mr. Picos, date of birth _____ residing at _____, San Diego, Ca 92113, was registered to vote in San Diego County. Mr. Picos registered to vote on June 10, 1998. The record shows that Mr. Picos voted in the following election (s) in San Diego County:

November 3, 1998	Gubernatorial General
March 2, 1999	Cons Special Library Prop/Valley Center School
November 7, 2000	Presidential General
November 5, 2002	Gubernatorial General
October 7, 2003	Statewide Special
November 2, 2004	Presidential General
January 4, 2005	City Of San Diego Special Run-Off Election
June 26, 2005	City Of San Diego-Special Municipal Election
June 6, 2006	Gubernatorial Primary
February 5, 2008	Presidential Primary

Mr. Picos registration was canceled today, June 19, 2013, on the basis of non-citizenship. A copy of the voter's registration form and voting history are attached. If you need further information, please do not hesitate to call (858) 495-5889.

Sincerely,

Cindy Wilder
Senior Office Assistant, Registration

Enclosures (2)



U.S. Citizenship
and Immigration
Services

Submit requested documents to:

U.S. Citizenship and Immigration Services, P.O. Box 1517, Chula Vista, CA 91912 (ATTN: ERC)

Picos

HAND DELIVERED

File

Date: June 19, 2013

Officer: CALIMQUIM

Examination of your application (N400) shows that additional information, documents or forms are needed before your application can be acted upon. Please return this notice with the requested information and/or documents within: **30 days from the above date.**

Failure to do so may result in the denial of your application.

During your N-400 interview you stated that you had registered to vote and had voted in a Presidential election. Please provide us with a letter from the Registrar of Voters. The letter must state the following:

1. The date you registered
2. The dates you voted
3. The date your registration was cancelled

VOTERS REGISTRAR
5201 Ruffin Rd., Suite 1
San Diego, CA. 92123

**** You may submit the requested documents by mail to the address listed above. You may also drop-off requested documents in person at the Chula Vista Field Office, Triage Window #12, Monday/Tuesday/Wednesday/Thursday before 2:00 pm.**

WE WILL NOT ACCEPT DOCUMENTS ON WEDNESDAYS. You will receive a response by mail.

Please attach a copy of this N-14 to the requested documents.

VOTER REGISTRATION FORM
FORMULARIO DE INSCRIPCIÓN PARA LOS VOTANTES

STATE OF CALIFORNIA
COUNTY OF SAN DIEGO

Postal Party - Partido Político

POSTCODE

(D)

(V)

ARE YOU A U.S. CITIZEN?

¿ES USTED CIUDADANO DE LOS ESTADOS UNIDOS?

98 JUN 10 0112:51

REC'D S. DIEGO CO

1
 Mr - Sr FIRST NAME - PRIMER NOMBRE
 Mrs - Sra MIDDLE NAME - SEGUNDO NOMBRE
 Miss - Srta LAST NAME - APELLIDO
 Ms
Picos

2
 ADDRESS Where You Live (Number, Street, Apt. No.) - DIRECCION Donde Usted Vive (Número, Calle, No de Apto.)
 City - Ciudad San Diego County - Condado CA ZIP Code - Cód Postal 92113

3
 If No Street Address, please furnish the name of the property owner and/or assessor's parcel number - Si No sabe su dirección, por favor escriba el nombre del dueño de la propiedad y/o el número de lote del asesor. Owner - Dueño Parcel - Lote

4
 ADDRESS Where You Get Your Mail (If Different) - DIRECCION Donde Recibe su Correo (Si Fuera Distinta)
 City - Ciudad State - Estado ZIP Code - Cód Postal

5
 DATE OF BIRTH - FECHA DE NACIMIENTO
 month day year (mes día año) 6
 PLACE OF BIRTH - LUGAR DE NACIMIENTO
Mexico

7
 CA DRIVER'S LICENSE OR ID CARD # - NO. DE LICENCIA DE CONDUCIR O TARJETA DE IDENTIFICACION DE CALIFORNIA
 TELEPHONE - TELEFONO 8
 ()

9
 PARTY REGISTRATION - REGISTRO DE PARTIDO
 (Check one box) (Marque un casillero)
 American Independent Party - Partido Independiente Americano
 Democratic Party - Partido Demócrata
 Green Party - Partido Verde
 Libertarian Party - Partido Libertario
 Natural Law Party - Partido de Ley Natural
 Peace and Freedom Party - Partido de Paz y Libertad
 Reform Party - Partido Reformista
 Republican Party - Partido Republicano
 Decline to State - Rehusa Declarar
 Other - Otro (Specify) - (Especifique)

10
 I prefer election materials in:
 Prefiero materiales electorales en:
 (Check one) (Indique uno)
 English Español
 OPTIONAL SURVEY: Can you help in the following area(s)
 ENCUESTA VOLUNTARIA: ¿Está dispuesto a ayudar en lo siguiente?
 Polling Place Worker
 Correo personal de una mesa electoral
 Polling Place Site
 Como ubicación de una mesa electoral

11
 HAVE YOU EVER BEEN REGISTERED TO VOTE?
 ¿HA ESTADO INSCRITO PARA VOTAR ALGUNA VEZ?
 Yes - Si No

11
 If Yes, give information from last voter registration form. - Si la respuesta fuera Si, provea la información del último formulario de inscripción para votantes.
 Name - Nombre
 Address - Dirección
 City - Ciudad County - Condado State - Estado
 Political Party - Partido Político

12
 WARNING: VOTER DECLARATION - Read and Sign Below.
 ADVERTENCIA: DECLARACION DEL VOTANTE - Lea y Firme Abajo.
 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.
 Soy ciudadano de EE.UU. Tendré por lo menos 18 años de edad en o antes de la próxima elección. No me encuentro en la prisión ni en libertad condicional por la condena de un delito mayor.
 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.
 Certifico so pena de perjurio bajo las leyes del Estado de California que toda la información de este formulario es verdadera y correcta.

12
 SIGNATURE - Sign in box below FIRMA - Firme en el casillero a continuación

12
 DATE - FECHA
6/8/98 37 BD 762513

13
 If someone helps fill out or keeps this form, see #13 instructions below. Si alguien le ayudara a llenar o conservara este formulario, vea las instrucciones #13 que figuran mas abajo.

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

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