Precinct Election Official Information Form – 2025 General Election

Please help us keep our records up to date by completing this form.

Name:	Date
Address:	
City, Zip:	
Home Phone:	Cell Phone:
E-mail Address: (Write "NONE" if you	u have no email.)
Are you fluent in Spanish?	Yes No
I am interested in Part time /Seaso	onal work at the Board of Elections
Emergency Contact	
Name:	Phone:
*Do you know someone w	no may want to work as a PEO on Election Day?
First and Last Name:	Phone: