



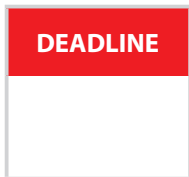
# SERVICE CLUB APPLICATION



PLACER COUNTY ELECTIONS OFFICE

Please print legibly

C O N T A C T	<b>Official Name of Service Club:</b>	
	<b>Contact Name:</b> (This will be the Elections Office primary contact person for the above named club/organization)	
	<b>Contact Address:</b>	
	<b>City / State:</b>	<b>Zip Code:</b>
	<b>Mailing Address:</b> (If different than above)	
	<b>City / State:</b>	<b>Zip Code:</b>
	<b>Contact Phone Number:</b>	<b>Alternate Number:</b>
<b>Contact Email:</b>		
P A Y E E	<b>Payee Name:</b> (This is who all stipend checks will be made out to)	
	<b>Payee Address:</b> (This is the address all stipend checks will be mailed to)	
	<b>City / State:</b>	<b>Zip Code:</b>
	<b>Payee Phone Number:</b>	<b>Alternate Number:</b>
	<b>Payee Email:</b>	
R E A D & S I G N	Please read the following service club responsibilities and sign below. If you have any questions, contact the Elections Office.	
	★ I understand that if any of the above contact information changes, it is the service club's responsibility to fill out a new application and submit it to the Elections Office.	
	★ I understand that it is the service club's responsibility to ensure that all members of the club, who are planning to serve, meet all the requirements to be a poll worker in the state of California.	
	★ I understand that it is the service club's full responsibility to staff their assigned precinct(s) and provide the Elections office with a contact information sheet for each member planning to serve.	
	★ I understand that the service club must have a minimum of 5 participants and that it is the club's responsibility to provide replacements if a member cancels or is not able to serve.	
	★ I understand that Inspectors, Judges and first time Clerks in Placer County must attend a mandatory training prior to each election.	
	★ I understand that the service club will receive one cumulative stipend check and that checks will be mailed 6-8 weeks after the election to the payee information provided above.	
	★ I understand that submitting this application does not guarantee placement.	
	<b>Signature</b> _____ <b>Date</b> _____	
	<b>Print Name</b> _____	



## RETURN VIA E-MAIL, FAX, MAIL OR IN PERSON TO:

**Placer County Elections Office**  
 2956 Richardson Dr. Auburn, CA 95603  
 PO BOX 5278 Auburn, CA 95604

**Fax:** (530) 886-5688

**E-mail:**

[placer\\_precincts@placer.ca.gov](mailto:placer_precincts@placer.ca.gov)