Date filed: _____

LOCAL TAXING DISTRICT ELECTION INFORMATION

(Due in County Clerk's Office by November 30,)

_____

Name *Mailing Address* *Email Address* *Phone*

NAME AND ADDRESS OF DISTRICT:

_____

Name of taxing district

_____

Location of Office *Mailing Address*

NAME AND ADDRESS OF DISTRICT ELECTION OFFICIAL: (usually Secretary or Clerk)

_____

Name *Mailing Address*

_____

Email Address *Phone*

PLACE WHERE DECLARATION OF CANDIDACIES ARE AVAILABLE & FILED:

_____

DATE OF NEXT ELECTION: _____

CURRENT OFFICEHOLDERS - SEAT/POSITION – TERM OF OFFICE – EXPIRATION OF OFFICE
(If more space is required, please make note and put on back of page.)

Name	*Address*	*Phone*	*Seat*	*Term*	*Expiration Date*
Name	*Address*	*Phone*	*Seat*	*Term*	*Expiration Date*
Name	*Address*	*Phone*	*Seat*	*Term*	*Expiration Date*
Name	*Address*	*Phone*	*Seat*	*Term*	*Expiration Date*
Name	*Address*	*Phone*	*Seat*	*Term*	*E xpiration Date*
Name	*Address*	*Phone*	*Seat*	*Term*	*Expiration Date*
Name	*Address*	*Phone*	*Seat*	*Term*	*Expiration Date*
Name	*Address*	*Phone*	*Seat*	*Term*	*Expiration Date*

MODE OF ELECTION: Zone or Sub-district _____ District-wide _____
(Are officials elected from a zone or subdistrict only or are they voted on by all electors district-wide?)

NO ELECTION OPTION:
Is an election held if only one candidate files for a position?_____YES _____NO

I hereby certify that the above information is true and correct.

_____ _____
Signature Title