

Please complete, print and obtain appropriate signature from the Appointing Authority.
For questions, call Elections at (309)888-5588

Pollwatcher Credentials

To the Judges of Election:

In accordance with the provisions of the Election Code, the undersigned hereby

Appoints _____ who resides at _____
(Name of Pollwatcher) (Address)

in the County of _____, Township of _____, State

of Illinois, and who is duly registered to vote from this address, to act as a

pollwatcher in _____ precinct, at the _____
(Precinct Name) (Type of Election)

election to be held on _____, 20____.
(Date of Election)

Signature of Appointing Authority

Title: (Party Official, Candidate, Civic Organization
President, Proponent or Opponent Group Chairman)

Under penalties provided by law pursuant to 10 ILCS 5/29-10 the undersigned pollwatcher certifies that the above information is true and correct, and who is duly registered to vote in Illinois.

(Signature of Pollwatcher)

(Signature of Election Authority)

Kathy Michael
McLean County Clerk