



Los Angeles County Registrar-Recorder/County Clerk

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Registrar-Recorder/County Clerk

GEOGRAPHIC INFORMATION SYSTEMS MAP REQUEST FORM

Phone: (562) 462-2471 Email: GIS@rrcc.lacounty.gov

* Required field

Name*: _____ Phone*: _____
 Email*: _____ Date*: _____
 Address*: _____
 City*: _____ State*: _____ Zip Code*: _____

SECTION 1*:

Number of copies requested: _____

Would you like your maps delivered? Yes No

SECTION 2*:

District Type: _____ District Name: _____ Division or Value: _____

SECTION 3:

FOR ELECTION MAPS PLEASE FILL IN THE FOLLOWING

Election Title: _____

- Polling Places (Locations subject to change) Election Precincts With Names

SECTION 4*:

(Please select the features you want to be included in the map)

- Established Precincts Streets Established Sub-Precincts City Boundaries

SECTION 5*:

(Please specify layer to add color to)

- District City Division/Value Precinct

Requests are not processed until payment is received.

FOR OFFICE USE ONLY

Receipt Number: _____

Map Received by: _____

Date: _____

GIS Maps	Quantity x \$30.00	Total
Shipping and Handling Fee	\$2.75	
Total Cost		