



NOVEMBER 8, 2016
GENERAL ELECTION

QUESTIONNAIRE

School District Name: _____

Superintendent Name	Contact Person (If different from Superintendent)
Mailing Address	Email
Contact Phone No.	Fax No.
	Date

Numbers Of Offices To Be Elected: _____

Please Indicate How Governing Board Members Are Nominated Or Elected:

By District At Large Nominated by District and Elected at Large Other _____

OFFICES TO APPEAR ON BALLOT	INDICATE FULL OR UNEXPIRED TERM (If unexpired include date of expiration)	INCUMBENT'S NAME	DATE
	<input type="checkbox"/> Full Term <input type="checkbox"/> Unexpired Term Date _____		_____ Appointed Provisionally _____ Appointed in Lieu _____ Elected
	<input type="checkbox"/> Full Term <input type="checkbox"/> Unexpired Term Date _____		_____ Appointed Provisionally _____ Appointed in Lieu _____ Elected
	<input type="checkbox"/> Full Term <input type="checkbox"/> Unexpired Term Date _____		_____ Appointed Provisionally _____ Appointed in Lieu _____ Elected
	<input type="checkbox"/> Full Term <input type="checkbox"/> Unexpired Term Date _____		_____ Appointed Provisionally _____ Appointed in Lieu _____ Elected
	<input type="checkbox"/> Full Term <input type="checkbox"/> Unexpired Term Date _____		_____ Appointed Provisionally _____ Appointed in Lieu _____ Elected

CANDIDATE STATEMENT INFORMATION

This is to inform you that the governing board of the above named district by resolution, dated _____ adopted the following policy regarding filing of Candidate Statements for district elections.

Number of words allowed: 200 or 400

Payment of the estimated cost must be made by the candidate at time of filing. School District will bear the cost for all statements.

School District will bill candidate after the election. Other _____

Please indicate number of school measures (if any) you anticipate placing on the ballot: _____.

Last day for governing boards to adopt and file a resolution calling a special measure election is *August 12, 2016.*

Signature of Authorized Representative	Title
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RETURN FORM TO: REGISTRAR-RECORDER/COUNTY CLERK
Attn: Election Coordination Unit
12400 Imperial Highway, 2nd Floor, Room 2013A
Norwalk, California 90650

FORM CAN ALSO BE FAXED OR EMAILED TO: (562) 406-2149
ecu@rrcc.lacounty.gov