



**TOHONO O'ODHAM NATION
ELECTIONS OFFICE**

P.O. Box 837 • Sells, Arizona 85634
Phone (520) 383-8709 • Fax (520) 383-8228

Application for District Election Board

NAME: _____ DOB: _____

COMMUNITY: _____ DISTRICT: _____

MAILING ADDRESS: _____
P.O. Box/Street City/State/Zip

ENROLLMENT # _____ TOHONO O'ODHAM REGISTERED VOTER: ___ YES ___ NO

CONTACT INFORMATION: Phone _____ Message Phone _____

TOHONO O'ODHAM SPEAKER: ___ YES ___ NO IF NO, DO YOU UNDERSTAND?: ___ YES ___ NO

DO YOU HAVE RELIABLE TRANSPORTATION? ___ YES ___ NO

By my signature below I verify that I am an enrolled member of the Tohono O'odham Nation and am a resident or traditional member of the aforementioned District and community. I will be at least 18 years of age at the next primary, general, or special election. Further, my personal information as listed above is current and correct. Additionally, if I am appointed to a district election board I am willing and able to endure the time needed to conduct all elections and participate in any contest(s) that may follow.

Date Signature

Attention Applicants District Election Boards: The Board shall appoint and supervise a district election board for each of the districts of the Nation; provided that the Board shall give preference to O'odham speakers. Each district election board shall consist of a chairperson, two clerks, and two marshals who shall be appointed at least 20 days before a primary, general or special election and who shall hold such offices until all elections from that district have been certified. eligible for appointment to the district election board.

Compensation: The members of the District Election Boards shall be compensated at a rate prescribed by the Council.

ELECTION OFFICE USE ONLY:

Date received _____ By _____

ELECTION BOARD REVIEW:

Election Board Meeting Date: _____ Appointed: YES ___ NO ___

Date Election Board Chairman