

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)

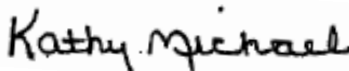
election to be held on \_\_\_\_\_, 20\_\_\_\_.  
(Date of Election)

\_\_\_\_\_  
**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**