

Shelby County Election Commission

Poll Watcher Appointment Form

Date:_____

To the Shelby County Election Commission:

I hereby appoint the following to serve during *Nursing Home Early Voting Election Day* as a poll watcher(s) for the (MUST COMPLETE A SEPARATE FORM FOR EACH SELECTION)

December 10, 2024 Town of Collierville Runoff Election at the following location(s):

Appointee(s)	Loca	ation 1	Location 2
REMINDER: Each candidate may appoint one (1) or more. (Althou any given time.)	gh multiple poll watch	ers may be appointe	ted, only one (1) of the poll watchers may be in a polling place
Candidate Information:	OR	Political P	Party or Organization Information
Candidate's Name (Printed)		Party Chair /	/ Representative of Organization's Name (Printed)
Candidate's Signature		Party Chair /	· / Representative of Organization's Signature
Title of Office Sought		Political Part	rty / Organization's Name
Contact Information of the Appointing Author	ority:		
Name			OW WOULD YOU LIKE TO BE NOTIFIED ONC ADGE(S) ARE READY?
Street Address City, State and Zip Code] Email] Phone
Phone Number E-Mail Address (Optional)			/HICH LOCATION WOULD YOU LIKE TO ICK-UP YOUR BADGE(S)?:
TO AVOID DELAY, PLEASE COMPLETE THE BO	x 🛶		Downtown Office (157 Poplar Ave. # 137) East Office (980 Nixon)