



2018 NEIGHBORHOOD COUNCIL ELECTION INFORMATION WORKSHEET



Please use this form to provide the Office of the City Clerk with your Neighborhood Council's polling place, polling place hours, and translation preferences for the 2019 Neighborhood Council Elections. This worksheet will supplement the policies and procedures in the Neighborhood Council 2019 Election Manual.

Board action is required to confirm the information on this worksheet. If this worksheet is not returned to the City Clerk by AUGUST 1, 2018, the City Clerk will use the election hours, polling place preference, and translation requests established for the 2016 Neighborhood Council Elections.

PLEASE SUBMIT THIS FORM TO THE CITY CLERK BY AUGUST 1, 2018

1	NEIGHBORHOOD COUNCIL: <u>TARZANA NC</u>		
2	ELECTION HOURS – Select a four or six hour window between the hours of 9:00 a.m. and 8:00 p.m. to conduct your election. <u>10</u> :00 <small>am/pm</small> TO <u>4</u> :00 <small>am/pm</small> START TIME END TIME		
3	ELECTION LOCATION – Provide one polling place within your NC boundaries to conduct your election and an alternative location in the event the first location is unavailable. The City Clerk will verify that this location is available on Election Day, complies with the Americans with Disabilities Act, and has adequate parking. If no location is selected, the City Clerk will first select the location used during the 2016 NC Elections or select a new location. Facility Name <u>TARZANA CHILD CARE CENTER</u> Address <u>5700 BECKFORD AVE.</u> Location Contact Information <u>MICHAEL RICKMAN</u> (818) 343-5946 <u>MICHAEL.RICKMAN@LACITY.ORG</u> Contact Name Phone Email Alternate Facility Name <u>TARZANA ELEMENTARY SCHOOL</u> Address <u>5726 TOPEKA DR.</u> Location Contact Information <u>ESTHER WEIDNER</u> (818) 881-1424 <u>GEW6858@LAUSD.NET</u> Contact Name Phone Email		
4	TRANSLATIONS – Select additional language(s) for the following forms. After the first language selected, the Neighborhood Council must contribute \$200 for each additional language. Candidate Filing Form: _____ Specify requested language(s) Voter Registration Form: _____ Specify requested language(s) Polling Place Interpreter: _____ Specify requested language(s)		
5	NC ELECTION BOARD CONTACT INFORMATION Election Committee Chair: <u>ERAN HESSLER</u> (818) 266-9918 <u>RON@HESSLER18.COM</u> Name Phone Email Secondary Contact: <u>LEN SHEFFER</u> (818) 343 7721 <u>LENJS@EARTHLINK.NET</u> Name Phone Email		

For more information, please contact the Office of the City Clerk-Election Division at
(213) 978-0444 or at clerk.electionsnclacity.org



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OPTIONAL ELECTION TYPE – ONLINE VOTING OR VOTE-BY-MAIL

Online and Vote-By-Mail elections have not been funded for the 2019 NC Elections. If the City Council were to provide funding for either of these options, please indicate your Neighborhood Council's election option (**select only one option**):

- 6 At-poll voting only
- Online voting, with at-poll voting (for documentation and self-affirmation-type elections)
- Vote-By-Mail, with at-poll voting (for self-affirmation-type elections only)

If your Neighborhood Council selected online voting or Vote-By-Mail, would your board allocate up to \$5,000 or more toward the cost of implementation? _____ YES _____ NO

NEIGHBORHOOD COUNCIL APPROVAL

By signing below, the President/Chair of the above-named Neighborhood Council declares under the penalty of perjury that the information in this Election Information Worksheet was approved as an official action of the Board per the Neighborhood Council's Bylaws at a Brown Act-noticed Neighborhood Council public meeting, held with a quorum of the Board present. If requested, the Neighborhood Council will provide the Neighborhood Council agenda, minutes, or resolution supporting the approval of this document.

Date of Board Action: _____ Board Vote _____ Yes _____ No _____ Abstentions

President/Chair: _____

Name
Signature
Phone
Email

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