



Los Angeles County Registrar-Recorder/County Clerk

DEAN C. LOGAN Registrar-Recorder/County Clerk

Election Document Request Form for Election Related Documents ONLY

Requestor Information		
Please complete this form in its entirety and submit via email to ecu@rrcc.lacounty.gov.		
Requestor Name:		
Contact Phone Number:		
Contact Email Address:		
☐ Resolutions/Ordinances	☐ Tax Rate Statements	☐ Arguments/Rebuttals
☐ Publication Notices	☐ Sample Ballots (from past elections)	Other (indicate in description)
Detailed Description of Reques	t:	
Reason for Request/Comments	5:	
*A fee may be charged to any candidate/person obtaining a copy of the above document(s). Please allow up to three (3) business days to receive a response regarding your request.		
	Election Coordination Unit Use On	ly
☐ Approved		
Rejected		
Comments:		
Staff Signature		Date