



City of Revere
Election Commission
281 Broadway
Revere, MA 02151-5051
781-286-8200 / 781-286-8206 fax

PAUL J. FAHEY
Election Commissioner
E-mail: pfahey@revere.org

Application for an Appointment as an Election Official

I hereby apply for a position as an Election Official for the City of Revere for a one-year term. I will work at the polling location and position assigned to me by the Board of Election Commissioners for a one-year term. I swear under the pains and penalties of perjury that I am a registered voter in the Commonwealth of Massachusetts.

TODAY'S DATE _____

NAME _____

ADDRESS _____

SOCIAL SECURITY NO. _____

DATE OF BIRTH _____

TELEPHONE NUMBER _____

DO YOU HAVE TRANSPORTATION? _____

PARTY AFFILIATION _____

E-MAIL ADDRESS _____

LIST THE LANGUAGES YOU SPEAK _____

SHIFT

6:45 a.m. – 1:30 p.m. _____

1:30 p.m. – 8:00 p.m. _____

All Day _____

LOCATION PREFERRED _____