


**Marshall County
Poll Worker Application**

Contact Information- Please Print

Date:	
Name:	
DOB:	
Address:	
Email:	
Phone:	Home: _____ Cell: _____

Party Affiliation

<input type="checkbox"/>		Democratic	<input type="checkbox"/>		Republican
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Preferences

- I am willing to work at any precinct in the county
- I am willing to work in a precinct located in my township
- I am willing to work in my own precinct *only*
- Other: _____

- Inspector
- Judge
- Clerk
- Sheriff
- Any*

Mail form to: Marshall County Clerk's Office, Voter Registration,
211 W. Madison St., Plymouth IN, 46563 574.935.8713
Email to: voter@co.marshall.in.us