



**LOS ANGELES COUNTY
REGISTRAR-RECORDER/COUNTY CLERK**

DEAN C. LOGAN

Registrar-Recorder/County Clerk

Use this form to submit updated **City Clerk** information to the Election Coordination Unit. Please return form to ECU@rrcc.lacounty.gov.

CITY INFORMATION

City Name: _____

City Clerk Name: _____

2nd Contact: _____ Position/Title: _____

City Address: _____

Mailing Address: _____
(if different from above)

Telephone No.: _____ Telephone No.: _____
(Public Use Only) *(RR/CC Use Only)*

E-Mail Address: _____ 2nd E-Mail: _____

Business Hours: _____ Fax No: _____

MAYOR INFORMATION

Is the Mayor:
 Elected or Appointed

If elected, what is the term of office?

If appointed, what are the beginning date _____, and the ending date _____ of the rotation?

Mayor Name: _____

QUESTIONS/COMMENTS

Completed by: _____

Rev. 4/30/25