



SARA CARLSON, Mayor

COUNCIL MEMBERS:

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- ROGER THALMAN, *Second Ward*
- OWEN MILLER, *Third Ward*
- DAVID J. BENSON, *Fourth Ward*
- TODD JENSEN, *Fifth Ward*

Martin Schultz,
Administrator

Reed Heidelberger,
Assessor

Thomas A. Jacobson,
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Lynn Timm
Building Official

Tim Schoonhoven,
Engineer

Jane Blade,
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*Interim Public Works
Coordinator/Park Director*

Michael J. Weber,
Planner

Richard Wyffels,
Chief of Police

Vinnie Hennen,
RCC Manager

Andrew Mellgren,
Liquor Store Manager

704 Broadway
Alexandria, MN 56308
(320) 763-6678
Fax (320) 763-3511
Internet Website:
ci.alexandria.mn.us

September 4, 2014

RE: 2014 Election Judge Training & Head Judge Meeting

Dear Past/Present/Future Election Judge,

The General Election is fast approaching for the City of Alexandria. Election Judge Training and Head Judge meeting dates have been set as follows at the Douglas County Public Works, 526 Willow Drive, Alexandria.

Election Judge Training: Tuesday, September 30th @ 10:00 a.m.

Head Judge Meeting: Wednesday, September 24th at 10:00 a.m.

In order for you to serve as an election judge, you must first be able to answer yes to the following questions:

1. eligible to vote in the State of Minnesota; and
2. affiliated with a major political party; and
3. able to read, write and speak English; and
4. will be appointed by the appointing authority (county, city, township, or school board), and
5. be trained and currently be certified as an election judge.

An election judge cannot be:

1. a candidate in that election (i.e., they are running for an office on the ballot used in that precinct); or
2. the husband, wife, parent, child, brother, or sister of a candidate or another judge in the same precinct; or
3. anyone who cannot read, write or speak the English language. (M.S. 204B.19, subd. 1 & 2.)

Please RSVP asap, so we know how many training materials to prepare.

Sincerely,

Kathy Summer, MCMC
City of Alexandria
320-759-3638 direct line
320-763-3511 fax
ksummer@rea-alp.com

/kjs

**CITY OF ALEXANDRIA
ELECTION JUDGE
APPLICATION**

Name _____

Address _____

Phone # (home) _____ **(work/cell)** _____

Social Security # _____

Party Preference (DFL) _____ **(R)** _____ **(I)** _____ **(Green)** _____

(State law requires that election judges declare their party preference)

_____ **I am available to work during the August 2014 Primary Election.**

_____ **I am available to work during the November 2014 General Election.**

_____ **I am interested in working as an Election Judge (\$10.00/hr).**

_____ **I am interest in working as a Head Election Judge (\$15.00/hr).**

_____ **I am interested in working as a Health Care Facility Judge (\$12.00/hr).**

Attest

By signing here I affirm that I am 18 years of age or older, a United State Citizen, able to read, write and speak English fluently and have not had my civil rights denied due to conviction or a felony.

Signature: _____ **Date:** _____

Do you have comments/suggestions for improving future election processes? Attach additional sheets if necessary.

Do you know anyone who would be interest in serving as an election judge? Please provide their name and address below. Attach addition sheets if necessary.

Please Read and Sign this Tennessee Warning

Information requested that is defined by state statute as public may be released on request. Private data containing your permanent address/home telephone number will be used to you. If you become employed with the city, your social security number will be released to the Social Security Administration and Internal Revenue Service for payroll and tax purposes. You are not legally required to provide the information. Failure to provide may result in a delay in notifying you. This information is available only to the person the information is about, and anyone authorized by you or law to see it. I authorize that my address and telephone number can be given to another election judge or school board election personnel for the sole purpose of contacting me to work for an election. I understand that my party designation is private and not released to outside groups. I waive my right to claim and hereby agree to hold harmless the City of Alexandria and any of its agents or employees for any injury or damage which I may experience as a direct or indirect result of the intended use of this information.

Signature: _____ Date: _____

Mail application to:
City of Alexandria
Attention: City Clerk
704 Broadway Street
Alexandria, MN 56308

Form W-4 (2014)

Purpose. Complete Form W-4 so that your employer can withhold the correct federal income tax from your pay. Consider completing a new Form W-4 each year and when your personal or financial situation changes.

Exemption from withholding. If you are exempt, complete only lines 1, 2, 3, 4, and 7 and sign the form to validate it. Your exemption for 2014 expires February 17, 2015. See Pub. 505, Tax Withholding and Estimated Tax.

Note. If another person can claim you as a dependent on his or her tax return, you cannot claim exemption from withholding if your income exceeds \$1,000 and includes more than \$350 of unearned income (for example, interest and dividends).

Exceptions. An employee may be able to claim exemption from withholding even if the employee is a dependent, if the employee:

- Is age 65 or older,
- Is blind, or
- Will claim adjustments to income; tax credits; or itemized deductions, on his or her tax return.

The exceptions do not apply to supplemental wages greater than \$1,000,000.

Basic instructions. If you are not exempt, complete the **Personal Allowances Worksheet** below. The worksheets on page 2 further adjust your withholding allowances based on itemized deductions, certain credits, adjustments to income, or two-earners/multiple jobs situations.

Complete all worksheets that apply. However, you may claim fewer (or zero) allowances. For regular wages, withholding must be based on allowances you claimed and may not be a flat amount or percentage of wages.

Head of household. Generally, you can claim head of household filing status on your tax return only if you are unmarried and pay more than 50% of the costs of keeping up a home for yourself and your dependent(s) or other qualifying individuals. See Pub. 501, Exemptions, Standard Deduction, and Filing Information, for information.

Tax credits. You can take projected tax credits into account in figuring your allowable number of withholding allowances. Credits for child or dependent care expenses and the child tax credit may be claimed using the **Personal Allowances Worksheet** below. See Pub. 505 for information on converting your other credits into withholding allowances.

Nonwage income. If you have a large amount of nonwage income, such as interest or dividends, consider making estimated tax payments using Form 1040-ES, Estimated Tax for Individuals. Otherwise, you may owe additional tax. If you have pension or annuity income, see Pub. 505 to find out if you should adjust your withholding on Form W-4 or W-4P.

Two earners or multiple jobs. If you have a working spouse or more than one job, figure the total number of allowances you are entitled to claim on all jobs using worksheets from only one Form W-4. Your withholding usually will be most accurate when all allowances are claimed on the Form W-4 for the highest paying job and zero allowances are claimed on the others. See Pub. 505 for details.

Nonresident alien. If you are a nonresident alien, see Notice 1392, Supplemental Form W-4 Instructions for Nonresident Aliens, before completing this form.

Check your withholding. After your Form W-4 takes effect, use Pub. 505 to see how the amount you are having withheld compares to your projected total tax for 2014. See Pub. 505, especially if your earnings exceed \$130,000 (Single) or \$180,000 (Married).

Future developments. Information about any future developments affecting Form W-4 (such as legislation enacted after we release it) will be posted at www.irs.gov/w4.

Personal Allowances Worksheet (Keep for your records.)

A	Enter "1" for yourself if no one else can claim you as a dependent	A _____
B	Enter "1" if: { • You are single and have only one job; or • You are married, have only one job, and your spouse does not work; or • Your wages from a second job or your spouse's wages (or the total of both) are \$1,500 or less. }	B _____
C	Enter "1" for your spouse . But, you may choose to enter "-0-" if you are married and have either a working spouse or more than one job. (Entering "-0-" may help you avoid having too little tax withheld.)	C _____
D	Enter number of dependents (other than your spouse or yourself) you will claim on your tax return	D _____
E	Enter "1" if you will file as head of household on your tax return (see conditions under Head of household above)	E _____
F	Enter "1" if you have at least \$2,000 of child or dependent care expenses for which you plan to claim a credit	F _____
G	Child Tax Credit (including additional child tax credit). See Pub. 972, Child Tax Credit, for more information. • If your total income will be less than \$65,000 (\$95,000 if married), enter "2" for each eligible child; then less "1" if you have three to six eligible children or less "2" if you have seven or more eligible children. • If your total income will be between \$65,000 and \$84,000 (\$95,000 and \$119,000 if married), enter "1" for each eligible child	G _____
H	Add lines A through G and enter total here. (Note. This may be different from the number of exemptions you claim on your tax return.) ▶	H _____

For accuracy, complete all worksheets that apply.
 { • If you plan to **itemize** or **claim adjustments to income** and want to reduce your withholding, see the **Deductions and Adjustments Worksheet** on page 2.
 • If you are **single and have more than one job** or are **married and you and your spouse both work** and the combined earnings from all jobs exceed \$50,000 (\$20,000 if married), see the **Two-Earners/Multiple Jobs Worksheet** on page 2 to avoid having too little tax withheld.
 • If **neither** of the above situations applies, **stop here** and enter the number from line H on line 5 of Form W-4 below.

Separate here and give Form W-4 to your employer. Keep the top part for your records.

Form W-4 Department of the Treasury Internal Revenue Service		Employee's Withholding Allowance Certificate		OMB No. 1545-0074 2014
▶ Whether you are entitled to claim a certain number of allowances or exemption from withholding is subject to review by the IRS. Your employer may be required to send a copy of this form to the IRS.				
1 Your first name and middle initial _____ Last name _____		2 Your social security number _____		
Home address (number and street or rural route) _____		3 <input type="checkbox"/> Single <input type="checkbox"/> Married <input type="checkbox"/> Married, but withhold at higher Single rate. Note. If married, but legally separated, or spouse is a nonresident alien, check the "Single" box.		
City or town, state, and ZIP code _____		4 If your last name differs from that shown on your social security card, check here. You must call 1-800-772-1213 for a replacement card. ▶ <input type="checkbox"/>		
5 Total number of allowances you are claiming (from line H above or from the applicable worksheet on page 2) _____		5 _____		
6 Additional amount, if any, you want withheld from each paycheck		6 \$ _____		
7 I claim exemption from withholding for 2014, and I certify that I meet both of the following conditions for exemption. • Last year I had a right to a refund of all federal income tax withheld because I had no tax liability, and • This year I expect a refund of all federal income tax withheld because I expect to have no tax liability. If you meet both conditions, write "Exempt" here ▶		7 _____		
Under penalties of perjury, I declare that I have examined this certificate and, to the best of my knowledge and belief, it is true, correct, and complete.				
Employee's signature (This form is not valid unless you sign it.) ▶				Date ▶
8 Employer's name and address (Employer: Complete lines 8 and 10 only if sending to the IRS.) _____		9 Office code (optional) _____	10 Employer identification number (EIN) _____	