Drop Box Use Agreement Form
November 3, 2020 Presidential General Election

Facility Name*: City of Menlo Park

Address: Onetta Harris Community Center, 100 Terminal Ave, Menlo Park

Primary Contact    Brian Henry
Primary Phone      408-674-6936

Email          bphenry@menlopark.org
Fax

Emergency Contact    Judi Herren
Emergency Phone    650-330-6612

Facility Hours

<table>
<thead>
<tr>
<th>Day</th>
<th>Hours</th>
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<tbody>
<tr>
<td>Monday</td>
<td>N/A</td>
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<tr>
<td>Tuesday</td>
<td>N/A</td>
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<tr>
<td>Wednesday</td>
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<td>Thursday</td>
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<td>Friday</td>
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<td>Saturday</td>
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<td>Sunday</td>
<td>N/A</td>
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Drop Box to be installed outside on the concrete walkway closest to the base of the flagpole. Estimate it would be about 6’ away from the flagpole.

*Facility name and address will be published in the Voter Information Guide and all outreach materials as written here.

The facility described above (“Facility”) agrees to host a Drop Box for the twenty-nine days prior to Election Day.

The Drop Box at the “Facility” will remain open to the public for the hours posted. The schedule of hours for the voting public will be included in the sample ballot and voter information pamphlet that will be shared with all San Mateo County registered voters, will be published on the San Mateo County website (“www.smcacre.org”), and will also be posted on the California Secretary of State’s website. The Drop Box at the Facility shall be accessible to persons with disabilities.

In accordance to California Elections Code 20135 (c), a staffed Drop Box “securely fastened to a stationary surface or to an immovable object”. If there is no immovable object upon which to fasten or strap the Drop Box, then the “Facility” may request that a discreet bracket be installed on a wall at no charge to the facility.

Access to the Facility will be granted to Elections staff during regular business hours at minimum every 72 hours to retrieve ballots from the Drop Box, excluding Saturdays and Sundays. On Election Day,
the Drop Box will be retrieved from the Facility. Signage for the Drop Boxes will be available and displayed if requested.
I, THE UNDERSIGNED, ACKNOWLEDGE THAT I HAVE AUTHORITY TO ACT ON BEHALF OF THE FACILITY. I HAVE READ AND UNDERSTAND THE ABOVE TERMS OF THIS AGREEMENT AND, BY SIGNING BELOW, AGREE THAT THE FACILITY WILL COMPLY WITH SUCH TERMS.

_________________________________________ _ ______________________________
Signature         Date

____________________________________________ 
Print Name

9/16/2020