Montana Association of Counties
2715 Skyway Drive, Ste. A o Helena, MT 59602
406-449-4360 o (fax) 406-442-5238
General Email: maco@mtcounties.org

County Identification Card Authorization Form

County Employee Name: ________________________________________________
(Please Print)

County Address: ______________________________________________________
MACo will not print personal addresses on ID cards

City: ___________________________ ZIP Code: ______________________

County: ___________________________ Phone Number: ______________________

Title: ___________________________ Department: ___________________________

Employee Signature: ___________________________________________________

Date: __________________________

Authorized County Elected Official Signature: ___________________________

Please print County Elected Official name: ___________________________

Date: __________________________

Cost: $10 each, invoiced with shipment.
Submit a copy of this form for each ID via email or fax, along with a photograph. MACo will not accept faxed pictures or pictures with unrecognizable subjects. Submitted pictures should be clear close-ups of front of subjects’ face to ensure quality and usability. We recommend subjects do not wear sunglasses and/or hats. Pictures MUST be sent in JPEG format by email, CD or thumb drive to:

Montana Association of Counties
Attn: Sharon
2715 Skyway Drive, Suite A
Helena, MT 59602
Email: swilson@mtcounties.org - (406) 449-4360 Fax: (406) 442-5238