REQUEST FOR VOTER RECORD INFORMATION
VOTE BY MAIL DATA

MATERIAL & FORMAT SELECTION:

☐ Alphabetical Index (Hard Copy) ☐ Diskette

DATA SELECTION:

☐ Countywide ☐ By Precinct (list below)

☐ By District _____ Precincts: _____

☐ Party Specific _____

☐ Date Range _____ to _____

FEE SCHEDULE:

Hard Copy List	$ 10.00 + .10c per page
CD	$ 10.00 flat rate
Labels	$ 40.00 set up fee + $10 per 1,000 labels

DECLARATION OF APPLICANT:

I, the undersigned, agree, that within five (5) calendar days of notification of completion of my request, payment will be made in full to the County Clerk - Elections Division.

_____ _____ _____

Date Signature of Applicant Telephone Number

FEE ITEMIZATION:

Total Number of Records: _____

Total Number of Pages: _____

Rate per Record/Page: _____

Total Fee Due: _____

For Office Use Only

Pick up _____ Call _____	Order Approved _____