

VOTER REGISTRATION INFORMATION REQUEST
ELECTIONS DIVISION
STATE OF ALABAMA
BETH CHAPMAN, SECRETARY OF STATE

OFFICE USE ONLY

Request # _____
 Receive Paperwork Date _____
 Receive Payment Date _____
 Delivery/Mail Date _____

NAME _____ ORGANIZATION _____
 ADDRESS _____ PHONE (with area code) _____
 CITY _____ STATE _____ ZIP _____

1 NAME OF COUNTY, CITY AND/OR DISTRICT (E.G., STATE HOUSE, STATE SENATE, CITY COUNCIL) FOR WHICH THE LIST IS REQUESTED - Please be specific. Include district where applicable. You may include multiple counties, cities and/or districts.

2 VOTER STATUS (select one) Active Inactive Both Active & Inactive

3 VOTER'S INFORMATION - Select the information you would like included for each voter. Mark all boxes that apply. **Your list will include only the information you select in this section.**

<input type="checkbox"/> Voter's Full Name	<input type="checkbox"/> Race	<input type="checkbox"/> County Commission District
<input type="checkbox"/> Voter's Status (active or inactive)	<input type="checkbox"/> Gender	<input type="checkbox"/> County School District
<input type="checkbox"/> Residence Address	<input type="checkbox"/> US Congressional District	<input type="checkbox"/> Municipality (as available)
<input type="checkbox"/> Mailing Address (as available)	<input type="checkbox"/> State Senate District	<input type="checkbox"/> Municipal Precinct Number (as available)
<input type="checkbox"/> Phone Number (as available)	<input type="checkbox"/> State House District	<input type="checkbox"/> Municipal Ward (as available)
<input type="checkbox"/> Date of Birth	<input type="checkbox"/> State Board of Education District	<input type="checkbox"/> City Council District (as available)
<input type="checkbox"/> Date of Registration	<input type="checkbox"/> Jefferson County Division (Birmingham/Bessemer)	<input type="checkbox"/> City School District (as available)
<input type="checkbox"/> Last Election Voted	<input type="checkbox"/> County Precinct (with Precinct Part)	<input type="checkbox"/> Fire District (as available)

4 DELIVERY OF VOTER LIST (select one) Mail E-Mail Pick up
 For delivery by e-mail, please provide an e-mail address: _____

5 MEDIA FOR VOTER LIST (select one) Paper 3.5" Diskette CD-ROM E-mail
 For lists on diskette or CD, or sent by e-mail, select format: Microsoft Excel Microsoft Access ASCII text, tab-delimited

PLEASE NOTE:

- Submit this form to request a voter list. **Allow time for processing your request.**
- **Cost for the voter list:** Before filling your request, **the Secretary of State's office will provide a quote for the cost of the list for your approval. Do not send any payment with this form.**
- The State of Alabama will accept a **CHECK** or **MONEY ORDER** (made payable to the Secretary of State's office) or the following **CREDIT** or **DEBIT CARDS** (American Express, Master Card, Discover or Visa). A convenience fee will be added to the cost of your list if you pay using a debit or credit card.
- **REFUND POLICY: THE VOTER LIST YOU HAVE REQUESTED MAY OR MAY NOT CONTAIN ALL THE INFORMATION YOU NEED. ONCE YOU HAVE RECEIVED YOUR VOTER LIST, WE CANNOT REFUND YOUR PURCHASE PRICE.**

SORT ORDER - By default, lists are sorted alphabetically by last name. If you need the list sorted by some other criteria, please describe.

■ **MAIL ORDER TO:** Secretary of State
 Attn: Ed Packard
 PO Box 5616
 Montgomery, AL 36103

■ **FAX ORDER TO:** (334) 242-2444

■ **FOR INFORMATION:** (334) 242-7210
 (800) 274-8683

DO NOT SEND ANY PAYMENT WITH THIS REQUEST!

Signature _____ Date _____