Board of Elections
807 S Walker Street
PO Box 1232
Burgaw, NC 28425
910-259-1220
910-259-1269 *fax*
pender.boe@ncsbe.gov

VOTER INFORMATION REQUEST FORM

North Carolina General Statute § 163-82.10

I, the undersigned, hereby request the following voter information (check the appropriate box) [X]

- [ ] Voter Registration
- [ ] Voter Statistics
- [ ] Voter History
- [ ] Mailing List
- [ ] Mailing Labels
- [ ] Other type of request

- [ ] **Political Party**
- [ ] *Democratic Voters Only*
- [ ] *Republican Voters Only*
- [ ] *Include all Parties*
- [ ] *Libertarian Voters Only*
- [ ] *Unaffiliated Voters Only*

- [ ] **Mailing Labels****
- [ ] By Household
- [ ] By Individual Voter

- [ ] **Voters who voted in the following election(s)** _____ *(Example May 2008)*

- [ ] *All Voters*
- [ ] *Only Voters who live in the Municipality Of* _____
- [ ] *Active Voters Only*
- [ ] *Only Voters who live in* _____ *District* _____

- [ ] **Other -** *(Tell us what you need)* _____

AVAILABLE DATA FIELDS - *PLEASE INDICATE THE DATA FIELDS THAT YOU WANT INCLUDED IN YOUR REPORT* [X]

- [ ] *Voter Registration Number*
- [ ] *Registration Date*
- [ ] *Voting Status*
- [ ] *Name: Last, First, Middle*
- [ ] *Name: Last, First,* *(separate fields)*
- [ ] *Race*
- [ ] *Gender*
- [ ] *Voting Precinct*
- [ ] *Residential Address*
- [ ] *Mailing Address*
- [ ] *Phone Number (if available)*
- [ ] *Municipality*
- [ ] ~~*Last Voted*~~
- [ ] *Congressional District*
- [ ] *Superior Court District*
- [ ] *Judicial District*
- [ ] *NC Senate District*
- [ ] *NC House District*
- [ ] *County Commissioner District*
- [ ] *Include Age**
- [ ] *Use Age Range** From: _____ To: _____ *(Example 1931 to 1950)*

** *Mailing Labels are $ .03 per label or $ .90 per page (30 labels per page) - You must pay for the entire page*

* *Age listings will show what age the voter will be on December 31st* *of this year* **-** *DATES or MONTHS OF BIRTH ARE* ***NOT*** *PUBLIC RECORDS*

How do you want this information and in what format?

- [ ] *By Email (Free)*
- [ ] *On a Compact Disc ($25.00)*
- [ ] *On a Flash Stick ($ 35.00)*
- [ ] *Send a PDF file*
- [ ] *Send an Excel file*
- [ ] *Send as a delimited text file*

Requester's Information:
- [ ] *Printouts (49 pages or less $ 3.00 - Additional pages are $ .05 each)*

Name: *(Print)* _____ Telephone: _____

Address:_____ City, State & Zip: _____

Email : _____ Signature _____

Our goal is to process all requests within 48 hours of receipt. However, since the volume of requests increase during the election periods and we fill these requests on a first come, first serve basis, we ask that you allow us 72 hours to process your request.