

# JOHNSTON COUNTY BOARD OF ELECTIONS

## DATA REQUEST FORM

Print Name: \_\_\_\_\_ Request Date: \_\_\_\_\_ Total Cost: \_\_\_\_\_

Address: \_\_\_\_\_ Contact Phone #: \_\_\_\_\_

E-Mail (if applicable): \_\_\_\_\_

**While our goal is to process all requests as soon as reasonably possible, requests are filled on a first-come, first served basis. Please allow a minimum of 5 business days to process your request.**

<b>1. How would you like the data you are requesting?</b> <b>Check one or more Cost</b> <table><tr><td><input type="checkbox"/> Print-out (Computer Report)</td><td>\$ .15/sheet</td></tr><tr><td><input type="checkbox"/> Copies</td><td>\$ .15/sheet</td></tr><tr><td><input type="checkbox"/> Labels (Peel-off)</td><td>\$ .40/sheet</td></tr><tr><td><input type="checkbox"/> USb</td><td>\$10.00each</td></tr><tr><td><input type="checkbox"/> E-mail</td><td>FREE</td></tr></table>	<input type="checkbox"/> Print-out (Computer Report)	\$ .15/sheet	<input type="checkbox"/> Copies	\$ .15/sheet	<input type="checkbox"/> Labels (Peel-off)	\$ .40/sheet	<input type="checkbox"/> USb	\$10.00each	<input type="checkbox"/> E-mail	FREE	<b>2. How would you like the data organized?</b> <b>List order:</b> (Specify) <table><tr><td><input type="checkbox"/> By Alphabetical voter</td></tr><tr><td><input type="checkbox"/> By Alphabetical street (walking list)</td></tr><tr><td><input type="checkbox"/> Individual precincts</td></tr><tr><td><input type="checkbox"/> Individual wards</td></tr></table>	<input type="checkbox"/> By Alphabetical voter	<input type="checkbox"/> By Alphabetical street (walking list)	<input type="checkbox"/> Individual precincts	<input type="checkbox"/> Individual wards					
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<b>3. Type of Request:</b> <table><tr><td><input type="checkbox"/> Voter Registration - (complete #4, 6, &amp; 7)</td></tr><tr><td><input type="checkbox"/> Voter History - (complete #4, 5, &amp; 6)</td></tr><tr><td><input type="checkbox"/> Voter Statistics - (complete #4 &amp; 6)</td></tr></table>		<input type="checkbox"/> Voter Registration - (complete #4, 6, & 7)	<input type="checkbox"/> Voter History - (complete #4, 5, & 6)	<input type="checkbox"/> Voter Statistics - (complete #4 & 6)																
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<b>4. What district or precinct information are you looking for?</b> <table><tr><td><input type="checkbox"/> Entire County</td><td><input type="checkbox"/> Municipal Only</td></tr><tr><td colspan="2"><input type="checkbox"/> County Commissioner District: _____</td></tr><tr><td colspan="2"><input type="checkbox"/> Board of Education District: _____</td></tr><tr><td colspan="2"><input type="checkbox"/> Precincts _____</td></tr><tr><td colspan="2"><input type="checkbox"/> Ward _____</td></tr><tr><td><input type="checkbox"/> NC House 10<sup>th</sup> District</td><td><input type="checkbox"/> NC House 26<sup>th</sup> District</td></tr><tr><td><input type="checkbox"/> NC House 28<sup>th</sup> District</td><td><input type="checkbox"/> US House 7<sup>th</sup> District</td></tr></table>	<input type="checkbox"/> Entire County	<input type="checkbox"/> Municipal Only	<input type="checkbox"/> County Commissioner District: _____		<input type="checkbox"/> Board of Education District: _____		<input type="checkbox"/> Precincts _____		<input type="checkbox"/> Ward _____		<input type="checkbox"/> NC House 10 <sup>th</sup> District	<input type="checkbox"/> NC House 26 <sup>th</sup> District	<input type="checkbox"/> NC House 28 <sup>th</sup> District	<input type="checkbox"/> US House 7 <sup>th</sup> District	<b>5. FOR VOTER HISTORY ONLY</b> <b>Election Type</b> <u>Enter Election Year(s)</u> <b>Needed</b> <table><tr><td><input type="checkbox"/> Primary _____</td></tr><tr><td><input type="checkbox"/> 2<sup>nd</sup> Primary _____</td></tr><tr><td><input type="checkbox"/> General _____</td></tr><tr><td><input type="checkbox"/> Municipal _____</td></tr><tr><td><input type="checkbox"/> Run-Off _____</td></tr></table>	<input type="checkbox"/> Primary _____	<input type="checkbox"/> 2 <sup>nd</sup> Primary _____	<input type="checkbox"/> General _____	<input type="checkbox"/> Municipal _____	<input type="checkbox"/> Run-Off _____
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<b>6. Information can include or be limited to any of the following:</b> <table><tr><td><input type="checkbox"/> Physical Address</td><td><input type="checkbox"/> Mailing Address</td></tr><tr><td colspan="2"><input type="checkbox"/> Age: _____ or Range from _____ to _____</td></tr><tr><td colspan="2"><input type="checkbox"/> Party: <input type="checkbox"/> Dem <input type="checkbox"/> Rep <input type="checkbox"/> Una <input type="checkbox"/> Lib</td></tr><tr><td><input type="checkbox"/> Race _____</td><td><input type="checkbox"/> Gender _____</td></tr><tr><td><input type="checkbox"/> Active Voters</td><td><input type="checkbox"/> Inactive Voters</td></tr><tr><td colspan="2"><input type="checkbox"/> Phone Numbers</td></tr></table>	<input type="checkbox"/> Physical Address	<input type="checkbox"/> Mailing Address	<input type="checkbox"/> Age: _____ or Range from _____ to _____		<input type="checkbox"/> Party: <input type="checkbox"/> Dem <input type="checkbox"/> Rep <input type="checkbox"/> Una <input type="checkbox"/> Lib		<input type="checkbox"/> Race _____	<input type="checkbox"/> Gender _____	<input type="checkbox"/> Active Voters	<input type="checkbox"/> Inactive Voters	<input type="checkbox"/> Phone Numbers		<b>7. Additional comments or requests (if applicable):</b>							
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Payment type: ☐ Cash (exact amount please)

☐ Check or Money Order (made payable to 'Johnston County Board of Elections')

**Acknowledgment of receipt of data:**

Signature: \_\_\_\_\_ Date: \_\_\_\_\_