



DC Board of Elections
 1015 Half Street, SE, Suite 750
 Washington, DC 20003
 (202) 727-2525 (office) 202-347-2648 (fax)
 www.dcboe.org

REQUEST FOR VOTER REGISTRATION DATA, MAPS OR PETITIONS SIGNATURES

REQUESTOR INFORMATION

Requestor's Name/Group: _____
 Address: _____
 City/State/Zip: _____
 Day Phone No: _____ Evening Phone No: _____
 Contact Person: _____
 E-Mail Address: _____
 Signature: _____ Date: _____

Output Format and Cost:

- CD-ROM of Voter Registration Data (\$2.00)
 Microsoft Access _____ Microsoft Excel _____
- E-mail of Voter Registration Data (No Charge)
 (Entire Voter Roll may only be obtained in Microsoft Access CD-ROM format.)
 Microsoft Access _____ Microsoft Excel _____
- Large-Format Print Map (\$10.00)
 (Small-Format Maps may be viewed online at www.dcboe.org/maps.asp)
- CD-ROM of Nominating Petition Signature Images (\$2.00 each)
- CD-ROM of Ballot Measure Signature Images (\$2.00 each)

Other Requested Information

Payment may be made by check or money order payable to the D.C. Treasurer. While our goal is to process all requests as soon as reasonably possible, requested and responsive information shall be provided within 15 business days, pursuant to the District of Columbia Freedom of Information Act. See D.C. Official Code § 2- 532(c). There is a \$30 service fee for all returned checks. The D.C. Board of Elections is committed to providing equal access to our services, programs and activities. If you need a reasonable accommodation to complete this request, please contact the ADA Coordinator at tjennings@dcboe.org or call (202) 727-2524 or via 711.

Initials _____

FOR OFFICE USE ONLY

Total Fee Due: _____
 Check/Money Order No.: _____
 Date Request Fulfilled: _____
 Delivered To: _____
 Date/Time Delivered: _____