



**SACRAMENTO COUNTY REGISTRAR OF VOTERS  
REQUEST FOR INFORMATION**



**REQUEST FORM FOR CUSTOM REPORT**

*Voter registration information for all registered voters is confidential and may not be disclosed except as authorized by law (California Elections Code sections 2194 and 2188.) Voter registration information is available for certain election, scholarly, journalistic, political and governmental purposes, as determined by the California Secretary of State. A county may not provide information for any political subdivision that is not wholly or partially contained within that county. All requests for voter registration information must be accompanied by a written application. Please print:*

Name of Applicant/Agent:		Last	First	Middle	Driver's License No. or State ID No.
Business Address:		City	State	Zip Code	Business Telephone No.
Mailing Address: (If different from above)		City	State	Zip Code	Alternate Telephone No.
Title or Position:					
Name of Candidate/Committee/Organization					

Please be very specific, and indicate whether you are a candidate for federal, state, or local office, whether you are requesting the information on behalf of a committee for or against an initiative or referendum, for which legal publication has been made, and indicate whether the information will be used for \_\_\_election, \_\_\_scholarly, \_\_\_journalistic, \_\_\_political purposes or \_\_\_governmental purposes.

- I agree that the information derived from the affidavits of registration of voters will be used only for election or governmental purposes, as defined by Title 2, Division 7, Article 1, Section 19003 of the California Administrative Code;
- I agree not to sell, lease, loan or deliver possession of the registration information, or copy of thereof, or any portion thereof, to any person, organization or agency without receiving written authorization to do so from the Secretary of State or from the source agency;
- I agree, subject to provisions of Title 2, Division 7, Article 1, Sections 19001 through 19007 of the California Administrative Code, to pay the State of California, as compensation for any unauthorized use of each individual's registration information, an amount, equal to the sum of \$.50 multiplied by the number of times each registration record is used by the applicant in an unauthorized manner.

**Our/my intended use of the above requested voter registration information is as follows: (Attach additional pages or documentation if needed)**

**I certify under penalty of perjury that the forgoing information is true and correct.**

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

**TYPE OF REPORT REQUESTED:**

**Walking List (MVMR010)**

Select one:  District: \_\_\_\_\_ District Number (if applicable): \_\_\_\_\_  
 Consecutive Precinct Range: \_\_\_\_\_  
 Select one:  Printed List (up to 6 precincts only)     Emailed     CD-ROM     FTP

**List of Poll Places with Voting Precincts (PODR009)**

Specify Election: \_\_\_\_\_  
 Select one:  Countywide  
 District: \_\_\_\_\_ District Number (if applicable): \_\_\_\_\_  
 Select one:  Printed List     Emailed     CD-ROM     FTP

**List of All Precincts (PDMJ001 or PDMR001)**

Select one:  Countywide  
 District: \_\_\_\_\_ District Number (if applicable): \_\_\_\_\_  
 Select one:  Printed List     Emailed     CD-ROM     FTP

**Other** – Please explain: \_\_\_\_\_

**FILE FORMAT: (If possible)**

**Comma Delimited**     **Tab Delimited**

**If you have requested to have your file emailed or FTP, please complete the following:**

Email Address: \_\_\_\_\_ **OR** FTP – Site: \_\_\_\_\_  
 Username: \_\_\_\_\_  
 Password: \_\_\_\_\_

**All electronic files are password protected. To obtain the password, please provide us with an email address. If you do not provide an email address, you will not be able to access the file.**

Email Address: \_\_\_\_\_

**Official Use Only:**

Received By: \_\_\_\_\_ Date: \_\_\_\_\_  In Person  Delivery  Email    Time Estimate from Voters-IT (if applicable): \_\_\_\_\_ Total Cost: \_\_\_\_\_  
 Reviewed by: \_\_\_\_\_ Date: \_\_\_\_\_    Payment Received:  Yes  No    Receipt No. \_\_\_\_\_  
 Manager Approval: \_\_\_\_\_ Date: \_\_\_\_\_  Approved  Rejected    Emailed request to Voters-IT on: \_\_\_\_\_ Completed on: \_\_\_\_\_  
 Notes: \_\_\_\_\_