



**Pender County Board of Elections**  
**807 S. Walker Street • PO Box 1232**  
**Burgaw, North Carolina 28425**  
**910-259-1220 • 910-259-1269 Fax**  
**penderboe@pendercountync.gov**

FOR OFFICE USE ONLY	
TOTAL FEE DUE:	_____
DATE REQUEST RECEIVED:	_____
DATE REQUEST FULFILLED:	_____
DELIVERED TO:	_____
DATE/TIME DELIVERED:	_____

## Election Information Request Form

- Printouts (8.5 x11 only)
- USB Stick \$25.00 (if we provide)
- Other

**If requester provides flash drive it has to be a new unopened data drive.**

**PRINTED COSTS:**  
 One-Page free  
 Labels (if we provide): \$0.90 per page  
 Labels (if you provide): \$0.05 per page  
 Printouts: \$0.05 per page

**Electronic Data Form/Method**  
 MS Excel    MS Word  
 Adobe (pdf)  
 Delivery Method:  
 EMAIL (Free)  
 Pick-up in person

**Requested Data Format:**  
 Mailing Labels (Choose)  
 Individual  
 Household

**Requested Information:**

- |   |   |  |   |
|---|---|--|---|
| <input type="checkbox"/> Voter Statistics | <input type="checkbox"/> Voter Registration | <input type="checkbox"/> Walking List          | <input type="checkbox"/> Campaign Finance _____ |
| <input type="checkbox"/> Voter History    | <input type="checkbox"/> Mailing List       | <input type="checkbox"/> Other (Specify) _____ | <input type="checkbox"/> Candidate List         |

**Specific Information:**

- |  |  |   |
|--|--|---|
| <input type="checkbox"/> By Political Party  | <input type="checkbox"/> Democratic Voters   | <input type="checkbox"/> Republican Voters  |
| <input type="checkbox"/> Include all Parties | <input type="checkbox"/> Unaffiliated Voters | <input type="checkbox"/> Libertarian Voters |
| <input type="checkbox"/> Include all Voters  | <input type="checkbox"/> Active Voters Only  | <input type="checkbox"/> Alphabetically     |

Voters who voted in the \_\_\_\_\_ election(s)

- Voters by:
- |  |   |   |
|--|---|---|
| <input type="checkbox"/> Precinct _____          | <input type="checkbox"/> District _____ | <input type="checkbox"/> Municipality _____ |
| <input type="checkbox"/> Other information _____ |   |   |

**Data Fields :**

- |  |   |   |   |
|--|---|---|---|
| <input type="checkbox"/> Voter Registration Number             | <input type="checkbox"/> Name: Last, First, Middle    | <input type="checkbox"/> Name: Last, First, Middle (as separate fields)             | <input type="checkbox"/> Age *will be age at end of year      |
| <input type="checkbox"/> Residential Address                   | <input type="checkbox"/> Mailing Address              | <input type="checkbox"/> Telephone Number   | <input type="checkbox"/> Gender <input type="checkbox"/> Race |
| <input type="checkbox"/> Precinct <input type="checkbox"/> VTD | <input type="checkbox"/> Municipality                 | <input type="checkbox"/> Status <input type="checkbox"/> Party                      | <input type="checkbox"/> Registration Date                    |
| <input type="checkbox"/> Congressional District                | <input type="checkbox"/> Superior Court District      | <input type="checkbox"/> Judicial District  | <input type="checkbox"/> NC Senate District                   |
| <input type="checkbox"/> NC House District                     | <input type="checkbox"/> County Commissioner District | <input type="checkbox"/> Age Range ___to___<br>Dates of Birth are not Public Record |   |

**Requestor's Information:**

**Name:** (Print) \_\_\_\_\_ **Signature:** \_\_\_\_\_

**Address:** \_\_\_\_\_ **City, State, Zip:** \_\_\_\_\_

**Telephone:** \_\_\_\_\_ **Email:** \_\_\_\_\_

**Charges/ Costs:**

PAYMENT IN ADVANCE MAY BE REQUIRED FOR PRINTOUTS ESTIMATED ABOVE \$50. PLEASE HAVE CORRECT AMOUNT DUE. REQUESTS ARE FILLED ON A FIRST COME, FIRST SERVED BASIS AND IN A TIMELY MANNER PER GS 163.

**PLEASE ALLOW UP TO TEN (10) DAYS FOR REQUESTS TO BE PROCESSED.**

Data is based on the most current information in the State Board of Elections databases. Data provided is true and accurate to the best of our knowledge at the time the request is processed. PCBOE