



PUBLIC INFORMATION REQUEST

DATE: _____

YOUR NAME: _____ PHONE #: _____

EMAIL: _____

COMPANY NAME: _____ PHONE #: _____

WHAT ARE YOU REQUESTING?: _____

How would you like to receive your records/ list? *Please check one*

Email Paper Copy CD

Which format would you like to receive your records? *Please check one*

Excel Spread Sheet PDF

Paper list/ records are \$0.10 per page.

Total amount for records cannot be determined until reports are completed.

List/ Records on CD: \$50.00.

Multiple reports or list can be placed on the same cd.

WE CANNOT GIVE REFUNDS FOR LISTS OR CD'S; ALL SALES FINAL

The information obtained from the copy of the county voters file shall not be used in connection with advertising or promoting commercial products or services. An offense under Sec. 18.009, V.T.C.A., Election Code is a Class A Misdemeanor.

SIGNATURE: _____ DATE: _____