

Qualified Voter File Data Request Form

Requester's Name: _____ Today's Date: _____

Address: _____ Phone Number: _____

Voter Data Requested: _____
County/City/Township

District: _____
County Commission/State House/School/Village

Ward/Precinct: _____
Jurisdiction/School/Village

_____ All current registered voters
OR
_____ voters that participated in a specific election - fill in below.

Voter Type: _____
In-person / Absentee / Both

Election Date: _____
General/Primary/City/School/Special

Each list will include the complete name, residential address, and mailing address (if available) for voters indicated above (in-person, absentee, or all) that participated in the above indicated election, if any.

Fees will be as follows:

Printed copy of list of voters: \$.10 per page

Address labels for voters: \$.50 per page

List of voters on disk or by email: \$10.00

Fee is due when you receive the requested information. You will be notified of the fee before your request is processed. Your request will be processed within three business days of receipt unless you are otherwise notified.

Send completed request by mail to Muskegon County Clerk, Elections Division,
141 E. Apple Ave., 2nd Floor, Muskegon, MI 49442 or by fax to 231-724-6262.

Please call 231-724-6425 with questions regarding this form.