

# Vote-by-Mail Voter Data Order Form

## Okeechobee County, FL

**Instructions:** Please fully complete this form and return it with the appropriate payment to the Okeechobee County Elections Office (located in the Historic Courthouse building,) 304 NW 2<sup>nd</sup> Street, Room 144, Okeechobee, FL 34972 or fax to 863-763-0152, however the requested data will not be provided until payment is received. Make check payable to the Okeechobee County Supervisor of Elections. No phone requests please. If you have questions you may contact the Elections Office at 863-763-4014.

For Office Use Only  
# Records

**Very Important:** Vote-by-mail ballot voter information is confidential and exempt (119.07(1)) and made available only to those so authorized as defined in 101.62(3).

### 1. Requested by

Contact Name: \_\_\_\_\_ Title: \_\_\_\_\_  
 Organization: \_\_\_\_\_ Candidate: \_\_\_\_\_  
 Mailing Address: \_\_\_\_\_  
 Phone: \_\_\_\_\_ Fax: \_\_\_\_\_ Date Requested: \_\_\_\_\_  
 Email: \_\_\_\_\_

### 2. Indicate below the Vote-by-Mail Voter data requested

**Precincts / Districts:**

- All Precincts
- City Precincts Only
- Selected Precincts Only (1 – 11, list below)  
\_\_\_\_\_
- County Commission: \_\_\_\_\_
- School Board: \_\_\_\_\_
- Congressional #17
- Senate #26
- House #55

**Political Parties:**

- All
- Democrat
- Republican
- No Party Affiliation
- Other: \_\_\_\_\_

**Sort Order:**

- Name
- Name by Precinct
- Residence Address
- Zip Code
- Registration Number

### 3. Choose below your preferred format and distribution method

**Initial File (select one)**

<input type="checkbox"/> <b>Comma Delimited Text File: \$10</b>	<input type="checkbox"/> <b>PDF Mailing Label Sheets: \$10</b>	<input type="checkbox"/> <b>Printed Mailing Labels: \$10 + \$.40/sheet</b>
<b>Distribution Methods (select one)</b>	<b>Distribution Methods (select one)</b>	<b>Distribution Methods (select one)</b>
<input type="checkbox"/> CD via US Mail (additional \$5) <input type="checkbox"/> CD Picked up at Elections Office <input type="checkbox"/> .txt file via Email	<input type="checkbox"/> CD via US Mail (additional \$5) <input type="checkbox"/> CD Picked up at Elections Office <input type="checkbox"/> .pdf file via Email	<input type="checkbox"/> US Mail (additional \$5) <input type="checkbox"/> Picked up at Elections Office

**Daily Update Files (no charge, provided by Email only)**

- Request daily update files. Indicate format desired (select one):     Comma Delimited Text File     PDF Mailing Label sheets
- Check here to have daily updates emailed to additional individuals and provide the additional email addresses below.
- \_\_\_\_\_

### 4. Authorizing Candidate or Committee Chairperson Signature (required)

X \_\_\_\_\_ Printed Name: \_\_\_\_\_ Title: \_\_\_\_\_

**Note:** One order per form. Payment is due BEFORE order will be released. Allow 3-4 business days for processing.