



## Park County Voter File Request

AN ELECTOR MAY FILL OUT THIS FORM OR GO ONLINE TO [SOSMT.GOV](http://SOSMT.GOV) IN ORDER TO REQUEST A VOTER REGISTRATION LIST

I, (print name) \_\_\_\_\_, hereby request the information below for a list of registered voters for:

- All of Park County
- Precinct (s): \_\_\_\_\_ Name of Precinct (s)
- District (s): \_\_\_\_\_ Name or type of District (s)
- Other – Specify: \_\_\_\_\_

**PLEASE CIRCLE YOUR CHOICE:**

**Active & Inactive**

**Active Only**

**Inactive Only**

**FEES:** Check All That Apply

\_\_\_\_\_ \$25.00 Emailed List of Registered Voters

\_\_\_\_\_ \$25.00 Absentee Report emailed daily when absentee voting starts, fee includes entire election period.

**I understand that the item(s) furnished are for *Noncommercial Use*, as required by Section 13-2-122, MCA.**

**By signing, the signor agrees the information furnished shall be for noncommercial use:**

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date

Phone: \_\_\_\_\_

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