



AN ELECTOR MAY FILL OUT THIS FORM OR GO ONLINE TO 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
- \_\_\_\_\_ \$ .50            per Page for Printed List of Registered Voters
- \_\_\_\_\_ \$ .05            per Label (s) Printed
- \_\_\_\_\_ \$25.00            Current List of Permanent Absentee 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: \_\_\_\_\_