

City of Wayne
Voter Information Request

Be specific about the information you need and sign your request. The City of Wayne assumes no responsibility for incorrect or unclear requests.

Date of Request: _____ Phone#: _____

Contact Name: _____

Name of Committee/Organization: _____

Address: _____

Email Address: _____

Please check all that apply:

- _____ QVF Disk - \$35.00 (per criteria)
- _____ QVF Labels - \$.03 per name
- _____ QVF Household Labels - \$.03 per name
- _____ QVF List - \$.01 per name
- Circle format for listing: (.pdf file) or (.txt file)

- _____ QVF Email
- List (circle format): (.pdf file) or (.txt file) (\$.01/name)
- Labels (circle format): (.pdf file) or (.txt file) (\$.03/name)

Specific information requested (i.e. Election dates, precincts, perm. AV only, voted AV, voted @ polls, sorted by street address, precinct, av status, etc.):

All requests for information must be accompanied by payment. Checks should be made payable to City of Wayne.

Signature: _____ Date: _____

FOR OFFICE USE ONLY:

Date of Request Received: _____ Date Completed: _____
Date Contact Notified: _____ Date of Pick-Up: _____