

**ALEXANDER COUNTY BOARD OF ELECTIONS**

PO Box 326

370 1<sup>ST</sup> Avenue SW

Taylorsville, North Carolina 28681

Phone: 828-632-2990

Fax: 828-632-1381

**DOCUMENT TYPE**

\_\_\_\_\_ **PRINT-OUTS** - \$0.25 for the first page (\$0.05 each additional page)

\_\_\_\_\_ **LABELS** - \$0.50 per page (30 labels per page)

\_\_\_\_\_ **CD** - \$25.00 per CD – comma delimited text format

\_\_\_\_\_ **E-MAIL** - Free

(We can only accept exact change or a check.)

*(All charges may be subject to change per NCGS 163-82.10(b)(2))*

**SELECTION**

\_\_\_\_\_ All registrations county-wide

\_\_\_\_\_ Only \_\_\_\_\_ Party

\_\_\_\_\_ Other \_\_\_\_\_

**DATA REQUESTED**

\_\_\_ Name

\_\_\_ Sort alphabetical for entire document

\_\_\_ Residence Address

\_\_\_ Sort alphabetical by precinct

\_\_\_ Mailing Address

\_\_\_ Sort \_\_\_\_\_

\_\_\_ Precinct

\_\_\_ Party

\_\_\_ Age

\_\_\_ Race

\_\_\_ Voter History –specify election(s) \_\_\_\_\_

\_\_\_ Other - \_\_\_\_\_

**REQUESTOR INFORMATION**

*Requestor's Name (print)* \_\_\_\_\_ *Date* \_\_\_\_\_

*Daytime Telephone Number* \_\_\_\_\_ *Signature* \_\_\_\_\_

**FOR BOARD OF ELECTIONS OFFICE USE**

Date Completed \_\_\_\_\_ Staff compiling report \_\_\_\_\_

Cost \_\_\_\_\_ Staff receiving payment \_\_\_\_\_