



State of Delaware Department of Elections Voter Registration File Request

FOR OFFICE USE ONLY

Amount Paid: _____ Rec. By: _____

CFID #: _____ IRTS #: _____

1. Requestor

Full Name: _____ Phone: _____

Residential Address: _____

2. Requestor Type *(Select one)*

Major/Minor Political Party Candidate Public
 General Assembly; State Agencies; County or Local Government

3. Requested Data *(Select one)*

Statewide Other Specify: _____

4. File Format *(Select one)*

Tab-Delimited Text File (TXT) Comma-Separated Values (CSV) MS Excel (XLSX)

5. Organization Information *(Required when requesting on behalf of an organization)*

Name of Entity: _____ Phone: _____

Address: _____ Company Contact: _____

6. Delivery Information

Email Address: _____

Important: Data will be sent via secure email. Visit <https://de.gov/securemail> for more information.

7. Payment Information *(Cost is \$25.00 per request. Select one payment option)*

Check # _____ (Payable to State of Delaware) Cash (In person submission only)
 Money Order # _____ No Cost (See Title 15, Chapter 3, §304(e))

8. Ordering Notes *(Read Notes)*

- Allow **up to 10 business days** upon receipt of request ▪ Limit of 1 active request at a time
- Delaware Code, Title 15, Chapter 3, §304(h): Files and lists provided to members of the General Assembly and State agencies or county or local governments pursuant to subsection (f) of this section shall include voter names, addresses, political party affiliation, voting history, telephone numbers, and dates of birth. Files and lists provided to major and minor political parties pursuant to subsections (a) through (d) of this section and to candidates for elective office pursuant to subsection (e) of this section shall be limited to voter names, addresses, political party affiliations, voting history, legislative district information, telephone numbers, and years of birth. Files and lists provided to the public shall be limited to voter names, addresses, political party affiliations, voting history, legislative district information, and years of birth.

9. Affirmation *(Read Statement and Sign Oath)*

I swear or affirm, under penalty of perjury, that:

- The Voter Registration information and any accompanying documents received as part of this request will **not** be used for commercial solicitation or for any other purpose not related to the electoral process, or make the information available to the public or third parties or publish or republish the information in a way that allows it to be used in that manner.
- The information on this form is true, accurate, and complete to the best of my knowledge. I understand that a material misstatement of fact in completion of this document may constitute grounds for conviction of perjury.

Sign here X Today's date (MM/DD/YYYY)