

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)				
O Major/Minor Political Party	O Candidate	O Put	blic	
O General Assembly; State Agencie	s; County or Local Governme	ent		
3. Requested Data (Select one)				
O Statewide O Other Specify:				
4. File Format (Select one)				
O Tab-Delimited Text File (TXT)	O Comma-Separated Value	es (CSV)	O MS Excel (XLSX)	
5. Organization Information (Re	quired when requesting on b	ehalf of an o	rganization)	
Name of Entity:	Phone:			
Address:	Company Contact:			
6. Delivery Information				
Email Address:				
Important: Data will be sent via se	ecure email. Visit https://de.g	gov/securem	ail for more information.	
7. Payment Information (Cost is	\$25.00 per request. Select o	ne payment	option)	
O Check #	(Payable to State of Delaware)	O Cash (In person submission only)		
O Money Order #		O No Co	ost (See Title 15, Chapter 3, §304(e))	
8. Ordering Notes (Read Notes)				
 Allow <u>up to 10 business days</u> 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, 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, 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, telephone numbers, and years of birth. 				
9. Affirmation (Read Statement and				
 I swear or affirm, under penalty of perjury, that: The Voter Registration information and any accompanying documents received as part of this request will <u>not</u> 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. 				





https://ivote.de.gov

State Election Commissioner 905 S Governors Ave Ste 170 Dover DE 19904 Phone: (302) 739-4277 New Castle County Office Carvel State Office Bldg 820 N French St STE 400 Wilmington DE 19801 Phone: (302) 577-3464 Kent County Office 100 Enterprise Pl Ste 5 Dover DE 19904 Phone: (302) 739-4498 Sussex County Office 119 N Race St PO Box 457 Georgetown DE 19947 Phone: (302) 856-5367 VRFM006 v7.0 6/1/2022