

**Wayne County Board of Elections**  
**FOIL Request**  
**For Voter Registration Data**

Request for Access to Voter Registration Data

Instructions: All persons submitting a request to access public voter registration information must complete the following:

\* indicates a required field

\*Name: \_\_\_\_\_

\*Address: \_\_\_\_\_

\*City: \_\_\_\_\_

\*State: \_\_\_\_\_ \*Zip: \_\_\_\_\_ Phone: \_\_\_\_\_

\*E-mail: \_\_\_\_\_

NOTICE: NYS Elections Law Sec 3-103(5) prohibits using information derived from voter registration records for non-election purposes. The applicant hereby requests access to the voter registration records requested, accepts and understands the conditions outlines above and certifies that they have a right of access to the records. Any person who knowingly and willfully violates this provision is guilty of a misdemeanor (EL SEC 17-168)

Accept

Decline

Does Applicant apply on own behalf?  Yes  No

If **No**, name and address of person or organization on whose behalf applicant is acting.

Name: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Are you requesting to access the public information regarding

an individual voter?

a list or CD of voters by county, town, party or village?

**Individual Voter Request**

\* indicates a required field

\*First Name: \_\_\_\_\_

\*Last Name: \_\_\_\_\_

\*Address: \_\_\_\_\_

\*City: \_\_\_\_\_ \*State: \_\_\_\_\_ \*Zip: \_\_\_\_\_

**List of Voters Request**

Please select what you are requesting:

All active Wayne County voters

Active voters by Town of \_\_\_\_\_ / District(s) \_\_\_\_\_

Active voters by political party \_\_\_\_\_

Please Note: If you are requesting the information to be e-mailed; the exported file may have a large number of records (the entire county exceeds 53,500 voters) you must have software capable of handling very large files. The file will be provided in format discussed (txt, cvs or pdf) and a file layout will be included. The data file is accurate as of the close of business the day before a request is processed.

Applicants Signature: \_\_\_\_\_

Date: \_\_\_\_\_

The Agency has 5 business days to reject or comply with this request.

There is a photocopying charge of \$.25 per page and must be prepaid by check made out to Wayne County Board of Elections.

All returned checks are subject to a \$20.00 fee.

Cost \$ \_\_\_\_\_ Check # \_\_\_\_\_ Receipt # \_\_\_\_\_

BOE signature and Date: \_\_\_\_\_