



Chris H. Chambless

Supervisor of Elections
Clay County, Florida

PUBLIC RECORDS REQUEST FORM

*Name: _____ *Phone: _____ Date: _____
**Not mandatory per F.S. 119.07*

VOTER DATA

DIGITAL FORMAT: CSV or Excel File

Email - No Charge _____ CD - \$5.00 _____ USB drive - \$10.00 _____

Email: _____

All Voters

All Voters with Voting History

The most recent twenty (20) elections are selected by default.

Specific elections requested: _____

Narrow Your Selection (Optional)

Default selection is all voters. Any choices here will reduce the number of voters in your query. Print your selections below.

Precincts, Districts, City or Political Party:

Sort By (Optional)

Default sort is alphabetical by last name.

Alphabetical by Precinct

Residence Address

Residence Address by Precinct

Household

Registration number

Zip code

VOTE BY MAIL VOTER DATA

Website access for Vote by Mail information - No Charge

Only available to Candidates with Opposition, Political Parties, and Election Officials, F.S. 101.62.

MAPS

_____ 8.5 x 11" (regular paper) \$1.00
_____ 36 x 48" (regular paper) \$5.00
_____ 36 X 48" (semi-gloss paper) \$10.00

Please specify map criteria:

Precinct _____

District _____

City or Town _____

COPIES

_____ One-Sided Copy (Letter or Legal Size) \$0.15
_____ Two-sided Copy (Letter or Legal Size) \$0.20
_____ Certified Copy \$1.00

Number of copies: _____

INSTRUCTIONS / NOTES

OFFICE USE ONLY

Request taken by: _____

Amount due: _____

Date completed: _____ Initials: _____

Paid: _____

Date of delivery: _____

Check # _____ Cash

Note: Extensive use charges may apply pursuant to F.S. 119.07(4)(d).