



# VOTE BY MAIL DATA REQUEST FORM

Duval County Supervisor of Elections

Vote by mail request information is confidential and exempt from public disclosure under section 101.62(3), F.S., except to the following persons or entities that may obtain and use it for political purposes only:

1) Canvassing Board, 2) Election official, 3) Political party or official thereof, 4) Registered political committee, 5) Candidate who has filed qualification papers and is opposed in an upcoming election, and 6) Voter (entitled to his or her own vote by mail request information directly from Supervisor of Elections for county of residence).

You may deliver the form to our office, fax 904-630-1894 or scan and email to [lanas@coj.net](mailto:lanas@coj.net) or [bbytes@coj.net](mailto:bbytes@coj.net)

Upon verification, you will be queued to receive the daily vote by mail request information once the ballots are outbound. Ballots typically are mailed each business day in varying quantities. You will be notified when the vote by mail request information becomes available for each election.

- Canvassing Board  Political Committee
- Election Official  A political party or official
- Candidate who has filed qualification papers and is opposed in an upcoming election

Select a party or All Parties for data requested:

All Parties  Democrat  Republican  Other \_\_\_\_\_

Name: \_\_\_\_\_ Title/Office \_\_\_\_\_

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

City/State/Zip \_\_\_\_\_ Email: \_\_\_\_\_

Print

I affirm that I am a person authorized by Section 101.62(3), Florida Statutes, to acquire vote by mail request information.

X \_\_\_\_\_  
SIGNATURE OF PERSON REQUESTING INFORMATION DATE

I also designate the following person acting on my behalf to receive and use my username and password to obtain this information:

Name: \_\_\_\_\_ Title/Office \_\_\_\_\_

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

City/State/Zip \_\_\_\_\_ Email: \_\_\_\_\_

Call 904-630-8010 or 904-630-8004 if you need additional assistance. A username and password for access to Candidate File Distribution will be assigned and emailed to you.

Note: Except for your username and password, all information on this form becomes a public record.

### FOR OFFICIAL USE ONLY

Date received \_\_\_\_\_

Username \_\_\_\_\_

Password \_\_\_\_\_

Date contacted \_\_\_\_\_