



Duval County Supervisor of Elections

REQUEST FORM FOR VOTE BY MAIL DATA

Vote By Mail ballot request information is confidential and exempt from public disclosure under section 101.62(2), Florida Statutes, except to the following persons or entities who may obtain and use it for political purposes only:

- Candidate who has filed qualification papers and is opposed in an upcoming election
- Canvassing Board
- Election official
- Political party or official thereof
- Registered political committees
- Voter (entitled only to access his/her own absentee ballot request information directly from Supervisor of Elections for county of residence).

Check the applicable authorization category and submit this completed form:

- Candidate (who has filed qualification papers and is opposed in an upcoming election)
- Canvassing Board
- Election Official
- Registered Florida Political Party Official - Print Name of Political Party:
- Registered Florida Political Committee Official - Print Name of Political Committee:
- Voter (entitled only to access his/her own Vote by Mail Ballot request information directly from the Duval County SOE)

Requestor Name: _____ Phone No.: _____

Street Address: _____

City: _____ State: ___ Zip: _____

E-mail Address: _____ (Where the login credentials will be sent)

I affirm that I am a person authorized by Section 101.62(3), Florida Statutes, to acquire Vote by Mail ballot request information and request Vote by Mail voter data for the _____ Election Cycle.

Signature: _____
(Electronic signatures will not be accepted)

Date: _____

Mail completed form to:
Supervisor of Elections
105 E. Monroe Street,
Jacksonville, FL 32202

Scan and return by email to:
CFackler@coj.net or BByles@coj.net

Fax to: 904-255-3433