



Data/Public Records Request Form

WAYNE COUNTY BOARD OF ELECTIONS
309 E Chestnut St. Goldsboro, NC 27530
919.731.1411 Fax 919.731.1409 elections@waynegov.com

(For office use only)

Date received: _____

Date fulfilled: _____

Total fee due: _____

Charges/Costs: In addition to any charges listed below, any records request that is for documents beyond generally maintained data/reports, will incur an additional \$15/hour charge for the cost to research and reproduce said documents. A \$30 reserve fee is required for such requests and will be applied to the final cost of the reproduction. The requester will be notified if their request meets this requirement and work will begin once the \$30 reserve has been received by the BOE. Once the data request is complete, the requester will be notified of any additional charges or if a refund is warranted. All data reports will incur a \$15 base fee due at the time of request in addition to any fees listed below. While our goal is to process all requests as soon as reasonably possible (within 7-14 days), requests are filled on a first come, first served basis and may take longer dependent upon election cycle.

Data Delivery Format: (one request per page)

Computer Printouts (\$0.10 per page) Email – Excel Webpage Data Upload – Excel
Other (specify): _____

Data Type:

Voter Registration Voter Statistics Voter History Walking List Mailing List Campaign Finance Report
 Other (specify): _____

Data Fields (Voter Registration): Please select the requested fields

<input type="checkbox"/> Name (Last, First, Middle)	<input type="checkbox"/> Precinct
<input type="checkbox"/> Voter Registration Number	<input type="checkbox"/> Municipality <input type="checkbox"/> Ward
<input type="checkbox"/> Status	<input type="checkbox"/> County Commissioner District
<input type="checkbox"/> Political Party	<input type="checkbox"/> Board of Education District
<input type="checkbox"/> Registration Date	<input type="checkbox"/> Congressional District
<input type="checkbox"/> Gender	<input type="checkbox"/> NC House District
<input type="checkbox"/> Ethnicity	<input type="checkbox"/> NC Senate District
<input type="checkbox"/> Race	<input type="checkbox"/> Sanitary District
<input type="checkbox"/> Age (at end of year)	<input type="checkbox"/> Judicial District
<input type="checkbox"/> Residential Address	<input type="checkbox"/> Prosecutorial District
<input type="checkbox"/> Mailing Address	<input type="checkbox"/> Superior Court District
<input type="checkbox"/> Telephone Number	<input type="checkbox"/> All

Voter History (specify Election & Contest): _____

Voter Statistics (specify): _____

Other requests (specify): _____

Requester Info:

Name (print) _____ Email _____

Signature: _____

Phone: _____

Staff Notes: