**Supervisor of Elections**
Hon. Paul A. Stamoulis
Charlotte County, Florida

226 Taylor Street Unit 120
Punta Gorda, FL 33950
soe@charlottevotes.com

**(941) 833-5400**

**VOTE BY MAIL FILE REQUEST FORM**

**Date:** _____

**Name of Requestor:** _____ **Phone Number:** _____
Please Print Name

**E-mail** _____

**1. Election Requested** _____

**2. Party Choice**

- ☐ Democratic
- ☐ Republican
- ☐ NPA
- ☐ Other – specify Minor Party _____
- ☐ ALL

**3. District** *Choose all that apply by checking the box(es) and be sure to fill in district information*

☐ House District_____ ☐ Senate District_____ ☐ Congressional District _____ ☐ City of Punta Gorda ☐ ALL of County

☐ Special Districts (*specify*): _____

**Files will be made available on a daily basis via a downloadable text file from our website, using your assigned user login and password**

Per Florida Statute 101.62(3) this information shall be confidential and exempt from the provisions of s. 119.07(1) and shall be made available to or reproduced only for the voter requesting the ballot, canvassing board, an election official, a political party or official thereof, a candidate who has filed qualification papers and is opposed in an upcoming election, and registered political committees or registered committees of continuous existence, for political purposes only.

***Please specify how you qualify to receive this information:*** _____

I hereby certify that I am entitled to receive this information pursuant to the above statute.

_____
Signature Date