Registered Voter Information Request Form



Sort Order			Data Delivery Preference		
_ Select One:			Cost \$15.00 per individual list		
☐ Alpha by Name			CD Email		
☐ Alpha by Precinct			*If file is too large, data can only be saved on a CD		
By Residence (walking list)			Payment of cash or check accepted. Make checks payable to "Supervisor of Elections"		
Household			Wake cheeks payable to Supervisor of Elections		
Option 1:					
☐ All registered voters in Indian River County					
Option 2:					
 □ Voters in Specific Municipality :					
Voting History: *Maximum 20 elections					
☐ Specific Elections:(Specify year and election type)					
Select Demographics:					
Party:	Gender:	Race:			
□ All	□ All	□ All		☐ American Indian/ Alaskan Native	
☐ Republican	☐ Males	☐ Hispanic		\square W	hite, non-Hispanic
☐ Democrat	☐ Females	☐ Asian/ Paci	ific Islander		
□ No Party		☐ Black, non-	n-Hispanic		
☐ Other(s)					
Requester's Name:					Special Instructions:
Signature:					
Address:					
Phone					
Email:				Save file in Excel □YES □NO	

Note: Data files on CDs and emails are in comma delimited ASCII format unless specified. First row contains headers. For ease of interpretation, data shall be imported into Excel. The Supervisor of Elections cannot provide technical support beyond this information.

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