

Request for Obtaining Data from Maine CVR – August 2019 Version

1. Request submitted to:

- A. Secretary of State (for district, county, and statewide lists)
  - B. Municipality of \_\_\_\_\_ (for only this municipality's data)
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2. Nature of request and permitted uses under 21-A MRSA §196-A (check applicable box(es) and provide detailed descriptions where required):

- A.  **Individual Voter Report** – §196-A (1)(A) – Individual voters requesting their own information.

Voter Name: \_\_\_\_\_ Voter DOB: \_\_\_\_\_

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- B.  **Party/Campaign Use Voter File** – §196-A (1)(B) – For the following permitted uses only:

- Party Activities – Party Name: \_\_\_\_\_
- Candidate Campaign – Candidate/Office: \_\_\_\_\_
- Issue Campaign – (list the campaign/petition effort in Maine and activities related to campaign): \_\_\_\_\_
- Get-out-the-vote Activities (list the campaign in Maine and activities related to the campaign): \_\_\_\_\_
- Elected/Appointed Official – Office Title: \_\_\_\_\_ District: \_\_\_\_\_  
Date elected/appointed: \_\_\_\_\_ Term: \_\_\_\_\_

**For voter data file selected above (check applicable boxes and provide information):**

**Enrollment Status**

- All voters (all parties and unenrolled)
- Unenrolled only
- Specific Party:       D               G               L               R

**Electoral Districts Requested**

- Municipality-wide data: Municipality: \_\_\_\_\_ District (if applicable): \_\_\_\_\_
- County-wide data: County: \_\_\_\_\_ District (if applicable): \_\_\_\_\_
- Statewide data
- State District data: Congressional District # \_\_\_\_\_  
State Senate District # \_\_\_\_\_  
State Representative District # \_\_\_\_\_

- Voter Participation History** (Available with Party/Campaign Use Voter File or Alpha Voting List)

**Include Voter Participation History for up to 2 elections (specify below):**

Date and name of Election: \_\_\_\_\_  
Date and name of Election: \_\_\_\_\_

- Voter File Update Request** – For use when requesting a voter file update (available with purchase of Party/Campaign Use Voter File).

- New or Changed Voters** (additions/changes to data from last data request)
  - Full File** (complete voter file)
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- C.  **Biennial Caucus Voter File** – §196-A (1)(C) – For use in conducting biennial caucus.

- Municipality-wide data: Municipality: \_\_\_\_\_
  - County-wide data: County: \_\_\_\_\_
  - Statewide data
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D.  **Absentee Voter File or Report** – §196-A (1)(D) – any person may obtain

Date and name of Election: \_\_\_\_\_

E.  **Governmental Use Voter File** –  §196-A (1)(E) – For governmental/quasi-governmental entities

Intended use of data: \_\_\_\_\_

F.  **Voter Demographics File** – §196-A (1)(F) – any person may obtain; statistical information available from Secretary of State only; no data included which identifies individual voters.

Choose first name or last name:  First Name OR  Last Name

**Statistical Reports** – any person may obtain

▪ Available from Secretary of State or municipality:

Rejections/Cancellation Summary Report – date range: \_\_\_\_\_

Registered & Enrolled Voters

▪ Available from municipality only:  Municipal Street Library  Ward/Precinct List

3. **Medium Requested** (subject to fees in 21-A MRSA, section 196-A.2):

A. Paper (pdf format, select one):  Printed report  Mailing labels

B. Electronic pipe-delimited text file saved on digital storage media (i.e. unused thumb drive provided by the state or the municipality).

**Note:** due to confidentiality and security factors, transfer of data by email is not approved.

4. **Arrangements for Payment:** (Please contact the Secretary of State's Office or the municipality for the amount of the fee.) Amounts greater than \$500 must be paid by either certified/bank check or money order, and made payable to:

▪ If submitted to the Secretary of State's Office: Treasurer of State or the Secretary of State

▪ If submitted to the Municipality: to the municipality

Personal/Business Check  Certified/Bank Check  Money Order  Credit Card

5. **Requestor Information** – The following information must be provided, and the form must be signed.

Individual name: \_\_\_\_\_

Entity name: \_\_\_\_\_

Mailing address: \_\_\_\_\_

E-mail address: \_\_\_\_\_

Day-time phone: \_\_\_\_\_ Fax: \_\_\_\_\_

I, the undersigned requestor of Information from Maine's Central Voter Registration (CVR) system, understand that the information I receive from the CVR is subject to the restrictions on use and redistribution of data, as provided in 21-A MRSA, section 196-A.

Signature of Requestor: \_\_\_\_\_ Date: \_\_\_\_\_

Office/Title for Named Entity: \_\_\_\_\_

**For Internal Use Only**

Fee Collected: \_\_\_\_\_ Check No. \_\_\_\_\_ Credit Card: \_\_\_\_\_

Date Data Created: \_\_\_\_\_ Date Issued to Requestor: \_\_\_\_\_  In Person  By Mail

Initial Request  Request for Update (Update #: \_\_\_\_\_)  Free List (no updates available)