



STATE OF RHODE ISLAND AND PROVIDENCE PLANTATIONS

ORDER A LIST OF REGISTERED VOTERS

Name: _____
 Address: _____
 City: _____ State: _____ Zip: _____
 Phone: _____ Email: _____

I want the list of registered voters for: (Please check one)

- Statewide
- Congressional District # _____
- City or Town of _____
- Representative District # _____
- Senatorial District # _____

Format: (Please check one)

- Printout (1 copy)
- CD (Data will be sorted alpha by last name in a pipe delimited format)
- Email (Call 401-222-2340 for details)

Type of sort: (Printout only) (Please check one)

Alphabetical by: Street Name

Alphabetical within: (Please check one)

- State
- State (by City or Town)
- Congressional District (by City or Town)
- City or Town
- Representative District (within each City or Town)
- Senatorial District (within each City or Town)
- Voting Precinct District (within each City or Town)

_____ Date

_____ Signature of Purchaser

We must receive payment in full before your order is processed. Please mail this application and your check or money order payable to "State of Rhode Island" to:

Office of Secretary of State
 Elections Division
 148 West River St.
 Providence, RI 02904-2615

LIST	PRINTOUT	DISK
STATEWIDE	\$700	\$25
CONGRESSIONAL DISTRICT	\$350	\$25
STATE REPRESENTATIVE DISTRICT	\$25	\$25
STATE SENATORIAL DISTRICT	\$25	\$25
CITY	\$75	\$25
TOWN	\$50	\$25