



Michael Watson
SECRETARY OF STATE

Public Record Request Form for Voter Registration Files

Requestor Information *(Please print)*

Name	
Organization	
Address	
City	
State	
Zip Code	
Telephone	
E-mail	
Delivery	Mail Hold for pick-up Electronic Delivery <i>(Email is not acceptable. Must be FTP, Dropbox, etc.—please provide info and credentials)</i>

Request Information

Statewide Request <i>(approximately 1.8M active voters)</i>	YES NO
District Request <i>(include names of all districts you would like included)</i>	

Pricing

District Charge (check one):	
County, county district, municipal or municipal district office	\$125
State legislative district, Judicial district (Chancery or Circuit Court, District Attorney), or comparable office involving more than one county that does not fall into the next tier	\$250
Congressional district, Supreme Court district, Court of Appeals district	\$500
Statewide list	\$1,000

Administrative Fee	\$100.00
District Charge	\$
Total Due	\$

I certify this data will only be used in accordance with the published rules which govern utilization.

Signature

Date

Please send request and check to:
 Mississippi Secretary of State's Office
 Attn: Public Records
 P.O. Box 136
 Jackson, MS 39206