

# Request for Information



Gila County Recorder  
Sadie Jo Tomerlin  
1400 East Ash Street  
Globe, Arizona 85501  
(928)402-8735  
800-291-4452



**Please fill out form  
completely and print legibly.**

**Thank-you!**

# AFFIDAVIT OF INTENDED USE

I, \_\_\_\_\_, acting as agent for \_\_\_\_\_.

At an address of \_\_\_\_\_,

do hereby swear or affirm that the voter's names I wish to purchase from the Gila County Recorder's Office will be used in accordance with Arizona Revised Statutes 16-168 (E) to wit:

*"Only for purposes relating to a political or political party activity, a political campaign or an election, for revising election district boundaries or for any other purpose specifically authorized by law..."*

The purpose for which the voters' names will be used:

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I also understand that further details may be required by the Recorder prior to delivery. Payment will be submitted with the request (if mailing) or payment will be made at time of picking up the requested information.

\_\_\_\_\_  
Date of Filing

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Print Name

\_\_\_\_\_  
Title or in what capacity

**EARLY BALLOT REPORTS WILL BE AVAILABLE 24 HOURS AFTER RECEIPT OF REQUEST FORM.**

**VOTER REGISTRATION/ELECTION CHARGES**

<b>Early Ballot Processing</b>	\$ 3.50 each
<b>Early Ballot Signature Verification</b> (A.R.S. § 19.121.05)	\$ .50 each
<b>To-Be-Verified Ballots (provisional ballots)</b>	\$ 3.00 each
<b>Early Ballot Request Report</b>	\$10.00 per report
<b>Petition Signature Verification</b>	\$ 3.00 each
<b>List:</b>	
Printed:	\$ .05 per name
Electronic: (Plus cost of Media)	\$ .01 per name
Diskette:	\$ 1.00 per diskette
CD	\$ 3.00 per CD-Rom
Labels	\$0.10 per label
Paper	\$0.20 per page
<b>Registers/Rosters:</b>	\$ .05 per name
Roster Paper	\$ .20 per page
Register (3) / Roster Covers (1)	\$15.00 per set
<b>Labor:</b>	\$17.00 per hour \$24.00 after 5:00 pm
<b>Special Reports/special Request/Computer Programming</b>	<b>Actual Cost</b>

**Pursuant to A.R.S §16-168 (E):**

*“The County recorder, on a request for an authorized use and within thirty days from receipt of the request...”*

Request made by: \_\_\_\_\_

Mail to: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Phone: \_\_\_\_\_  
Fax: \_\_\_\_\_

Please circle appropriate box or boxes below. For the information you would like to request.

**Election Type:**

- Special
- Presidential Preference
- Primary
- General

**City**

- Globe
- Miami
- Payson
- Hayden/Winkelman
- San Carlos
- Other \_\_\_\_\_ (Specify)

School \_\_\_\_\_ (Specify)

Fire \_\_\_\_\_ (Specify)

Other Special Dist. \_\_\_\_\_ (Specify)

**Early Voting List: Available Weekly**

**Voter Status**

- Active
- Inactive

**Party Affiliation(s) for chosen category(s): Check all that are requested**

- Democrat
- Republican
- Libertarian
- Reform
- Natural Law Party
- Green
- All Parties

**Format:**

- Paper
- Disk
- CD
- Labels

**Pursuant to ARS § 16.168E:**

*“Only for purposes relating to a political or political party activity, a political campaign or an election, for revising election district boundaries or for any other purpose specifically authorized by law...”*

Signature: \_\_\_\_\_

Date: \_\_\_\_\_