



**CITY OF MOUNT CLEMENS**  
 Office of the City Clerk  
 One Crocker Boulevard, Mount Clemens, Michigan 48043  
**REQUEST FOR VOTER INFORMATION**  
 Make checks payable to "City of Mount Clemens"

**NAME OF REQUESTOR:** \_\_\_\_\_

**ADDRESS OF REQUESTOR:** \_\_\_\_\_

**EMAIL ADDRESS:** \_\_\_\_\_

**BUSINESS PHONE:** \_\_\_\_\_ **CELL PHONE:** \_\_\_\_\_

**1. Information Requested**

- All Registered Voters
- Permanent Absentee Voter List
- All Registered Voters by Household
- List of Voters by Election Date      Date: \_\_\_\_\_
- Other \_\_\_\_\_

**2. Report Style**

- Paper List (\$10.00 set-up plus \$0.02 per name)
- Mailing Labels (\$10.00 set-up plus \$0.50 per sheet)
- CD or Flash Drive (\$5.00 set-up plus \$10.00 each [Formatted for Excel Report])
- Lists by E-mail (\$5.00 set-up per file) Voter Information Emailed Weekly (\$10.00 per week)

**3. Format**

- Excel (.csv (comma separated values) format)
- PDF (list or labels [30 labels per sheet])

- The City Clerk’s Office will contact you with the total balance due based on your request.
- All fees must be paid in full prior to processing your request.
- Allow 2 to 3 business days for processing once the request is paid in full.
- Daily absentee voter lists provided up to two times a week.

\_\_\_\_\_  
Signature of Applicant

\_\_\_\_\_  
Title of Applicant

\_\_\_\_\_  
Date

**DATE PICKED UP:** \_\_\_\_\_ **REQUEST TOTAL:** \_\_\_\_\_

