



Fergus County Elections Office Voter List Request



AN ELECTOR MAY FILL OUT THIS FORM OR GO ONLINE TO SOSMT.GOV IN ORDER TO REQUEST A VOTER REGISTRATION LIST

I, (print name) _____, hereby request the information below for a list of registered voters for:

- ☐ All of Fergus County
- ☐ Precinct (s): _____ Name of Precinct (s)
- ☐ District (s): _____ Name or type of District (s)
- ☐ Other – Specify: _____

PLEASE CIRCLE YOUR CHOICE:

Active & Inactive

Active Only

Inactive Only

FEES: System generated at the time of report ran. Payment must be received before information will be handed over.

_____ List only Hard Copy or Email - Circle choice

_____ Labels only Hard Copy or Email - Circle choice

_____ Both Hard Copy or Email - Circle choice

I understand that the item(s) furnished are for *Noncommercial Use*, as required by Section 13-2-122, MCA. By signing, the signor agrees the information furnished shall be for noncommercial use:

Signature

Date

Phone: _____

Email: _____

FERGUS COUNTY ELECTIONS
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