## ACCEPTED ABSENTEE/MAIL BALLOT LIST REQUEST - 2018 STATE ELECTIONS

## **Instructions**

Use this form to request a list of accepted absentee and mail ballots in the 2018 state primary or general election. The list is provided in a comma-delimited text format which can be opened in most text-editing, spreadsheet, and database programs.

| the list of accepted absent violation of Minnesota law                     | ee and n   | nail ba     | llots for      | purpo      | ses un       | relate   | ,       |        | •            | ,      | •       |          | •            |        |           |
|--|------------|-------------|----------------|------------|--------------|----------|---------|--------|--------------|--------|---------|----------|--------------|--------|-----------|
| Voter Information Name (as it would appear                                 | on your    | voter r     | ecord)         |            |              |          |         |        |              |        |         |          |              |        |           |
| Street Address   |            |             |                |            |              |          |         |        |              |        |         |          |              |        |           |
| City   |            |             |                |            |              | Stat     | :e      |        | Zip Cod      | de     |         |          |              |        |           |
| Email  |            |             |                |            |              | Pho      | one     |        |              |        |         |          |              |        |           |
| Report Information   |            |             |                |            |              |          |         |        |              |        |         |          |              |        |           |
| Choose a geographic area   | for your   | repor       | t:             |            |              |          |         |        |              |        |         |          |              |        |           |
| Statewide (\$46)   |            |             |                |            |              |          |         |        |              |        |         |          |              |        |           |
| Single Jurisdiction  | (\$30) – 5 | Specify     | Name (         | of city,   | , coun       | ty, dist | rict, e | tc.)   |              |        |         |          |              |        |           |
| Select the days of the abse  | ntee pe    | riod be     | fore the       | State      | Prima        | ary on   | 8/14/   | 18 γοι | would        |        | e repo  | rt run   | :            |        | 1         |
| 7/2- M T W   | / Th       | F           | 7/9-           | М          | Т            | W        | Th      | F      | 7/16-        | M      | Т       | W        | Th           | F      |           |
| 7/6<br>7/23-   |            |             | 7/13<br>7/30-  |            |              |          |         |        | 7/20<br>8/6- |        |         |          |              |        |           |
| 7/27   |            |             | 8/3            |            |              |          |         |        | 8/10         |        |         |          |              |        | j         |
| Select the days of the abse  |            |             | fore the       |            |              |          |         |        | /6/18 yc     |        |         |          | •            |        | 1         |
| 9/24- M T W  | / Th       | F           | 10/1-          | М          | Т            | W        | Th      | F      | 10/8-        | М      | Т       | W        | Th           | F      |           |
| 9/28<br>10/15-   |            |             | 10/5<br>10/22- |            |              |          |         |        | 10/12        |        |         |          |              |        |           |
| 10/19  |            |             | 10/26          |            |              |          |         |        | 11/2         |        |         |          |              |        | j         |
| Additional information   |            |             |                |            |              |          |         |        |              |        |         |          |              |        |           |
| Delivery Information   | :          | al al a. a. |                |            |              |          |         |        |              |        |         |          |              |        |           |
| Send the file(s) to this   | emaii a    | aaress      |                |            |              |          |         |        |              |        |         |          |              |        |           |
| Payment Information  Number of reports                                     | >          | cost p      | er repor       | <b>*</b> † | \$46<br>\$30 | = TOT    | AL CO   | ST     |              |        |         |          |              |        |           |
| Payment via cash   | (in-perso  | on orde     | ers only.      |            | •            | s are r  | ot pro  | duced  | d "while     | you w  | ait")   |          |              |        |           |
| Payment via check  | (          |             |                |            |              |          |         |        |              |        |         |          |              |        |           |
| Payment via mone   | y order    |             |                |            |              |          |         |        |              |        |         |          |              |        |           |
| Mail or deliver order to: M  | N Secre    | tary of     | State, 1       | 80 Sta     | te Off       | ice Blo  | lg, 100 | Rev C  | Dr Marti     | n Luth | er King | g Jr Blv | d, St P      | aul M  | N 5515    |
| Certification I certify that I am a register will be used only for purport |            |             |                |            |              |          |         |        |              |        |         |          | ted ab       | sentee | ballots   |
| Signature  |            |             |                |            |              |          |         |        | Date         |        |         |          |              |        |           |
| OFFICE USE ONLY Date -   | Fiscal     | Dat         | e - Media      | Prod       | Cli          | ent Acc  | t       | Aı     | mt Paid      |        | Work    | Order #  | <del> </del> | Re     | v. 7/2018 |

| FICE USE ONLY | Date - Fiscal | Date - Media Prod | Client Acct | Amt Paid | Work Order # | Rev. 7/2018 |  |  |
|---------------|---------------|-------------------|-------------|----------|--------------|-------------|--|--|
|               |               |                   |             |          |              |             |  |  |