

Orange County Supervisor of Elections

119 W. Kaley St. Orlando, FL 32806
P.O. Box 562001, Orlando, FL 32856
Phone: 407- 836-2070

Date Received _____

OFFICE USE ONLY:

Work Order #: _____

Number of Voters: _____

Date of Stats: _____

Online Municipal Code: _____

Qualifications Verified by: _____

Records Request Form

Individual /Organization Name: _____

Address: _____

Phone Number: _____

Email: _____

- *Requests are processed in order of submission and upon receipt of payment (if required).
- *Requests are completed within 24-48 hours of submission or receipt of payment.
- *Requestor must have access to compatible software to process electronic files.

Request Type

All voter files are text and zip file formats.

The Orange County Supervisor of Elections office does not provide technical assistance.

Internet Account

CD-Rom - \$10.00

Vote By Mail- only available to those specified in F.S. 101.62(3), if qualified, available though Internet.

Voter List-Posted to Internet Account for a period of fourteen days.

Files are specific to the following (please indicate district, municipal, precinct or party where applicable):

Countywide

U.S. Congressional District: _____

County Commission District: _____

FL House District: _____

School Board District: _____

Municipal, City of: _____

FL Senate District: _____

(Election related: Y/N)

Party: _____

Specified Precincts: _____

Voter List Special Request:

Street Index- Countywide only (Text format)

CD-Rom - \$3.00

Email

While a written request is not required, providing our office with this completed form will ensure clarity of your request, assist in processing, and provide means to contact you.

08/08/18

Statement of Website Accessibility-

<https://www.ocfelections.com/accessibility.aspx>

Maps: Maps include cities, major roads, and precincts-additional data is considered a special request and may require additional processing time. Maps only contain district sections that falls within the boundaries of Orange County. For special request map information, contact Mapping at 407-254-6554.

<input type="checkbox"/> 11 x 17 Color -\$.20 _____	<input type="checkbox"/> Municipal, City of: _____
<input type="checkbox"/> 24 x 36 wall size – \$5.00 _____	<input type="checkbox"/> County Commission District: _____
<input type="checkbox"/> 48 x 36 wall size – \$10.00 _____	<input type="checkbox"/> U.S. Congressional District: _____
<input type="checkbox"/> Map Book - \$25.00 _____	<input type="checkbox"/> FL House District: _____
<input type="checkbox"/> Countywide	<input type="checkbox"/> Specified Precincts: _____
<input type="checkbox"/> School Board District: _____	<input type="checkbox"/> Special Request: _____
<input type="checkbox"/> FL Senate District: _____	

Copies:

The following are available at a cost of .15c per page, 20c per double sided or color:

- Public record files, including candidate files
- Current and archival elections statistics
- Website printouts, including maps, voter statistics and election results

Items	Price	Amount
Internet Account	No charge	
Voter List	No charge w/Internet Account CD-Rom -\$10.00 plus postage if necessary	
Maps	\$.20, \$5.00, \$10.00, Map Book- \$25.00	
Copies	\$.15 per page, \$.20 double or color, plus postage if necessary	
Street Index	Email – no charge CD-Rom – \$3.00 plus postage if necessary	
Total Amount due:		

Office Use Only:

Date Payment Received: _____

Received by: _____

Paid Cash/Check#: _____