

KENDALL COUNTY ELECTIONS ADMINISTRATION OFFICE

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Public Information Request

Name: _____ Organization: _____
Address: _____ City: _____ State: _____ Zip: _____
Email: _____ Phone: _____

Election Reports (Please check all the boxes that apply)	Election Information
<input type="checkbox"/> Early Voting Roster (Daily) <input type="checkbox"/> Ballot by Mail Roster (Daily) <input type="checkbox"/> Daily Total of Voters Who Voted <input type="checkbox"/> Voters Who Voted - Election Day <input type="checkbox"/> Voters Who Voted - Early Voting <input type="checkbox"/> Other (Specify Below) _____ _____	Name of Election: _____ Date of Election: _____ Primary Election Only <input type="checkbox"/> PRIMARY Republican / Democratic <input type="checkbox"/> RUNOFF Republican / Democratic

<u>Media Type:</u>	<u>Format Type:</u>	<u>Delivery Method:</u>	<u>Date Information Needed:</u>
<input type="checkbox"/> Electronic <input type="checkbox"/> Paper <input type="checkbox"/> View Only	<input type="checkbox"/> PDF <input type="checkbox"/> EXCEL	<input type="checkbox"/> Pickup <input type="checkbox"/> E-Mail <input type="checkbox"/> U.S. Mail (extra Fee to mail)	____ / ____ / ____ Our office has 10 business days to produce your request; however, we will process your request as quickly as possible.

REQUESTOR CERTIFICATION:

PLEASE NOTE: "Section 18.009 Unlawful use of information on registration list: (a) A person commits an offense if the person uses information in connection with advertising or promoting commercial products or services that the person knows was obtained under Section 18.008 (b) An offense under this Section is a Class A misdemeanor."

I swear/affirm that the information obtained from the Election Administration Office will not be used to advertise or promote commercial products or services.

Requestor's Signature: _____ Date: _____

FOR OFFICE USE ONLY:

<input type="checkbox"/> # of Pages: _____	Record Readily Available: <u>Yes</u> / <u>No</u>
<input type="checkbox"/> # of CD's: _____	Time Spent gathering information: _____ hrs _____ mins
<input type="checkbox"/> Emailed: _____	Date Completed: _____
	Date/Time Requestor Notified: _____

TOTAL AMOUNT DUE: _____