



# SOLANO COUNTY

REGISTRAR OF VOTERS

**JIM FLANAGAN**  
Chief Information Officer  
Registrar of Voters  
TPFlanagan@solanocounty.com  
(707) 784-6675

**JOHN H. GARDNER**  
Assistant Registrar of Voters  
JHGardner@solanocounty.com  
(707) 784-3366

## Application to Purchase/View Voter Registration Information Applicant Information

The Applicant hereby agrees that the aforementioned information set forth in Affidavits of Registration of voters and any information derived from said electronic data processing information (hereinafter collectively referred to as "registration information") will be used ONLY FOR ELECTION OR GOVERNMENTAL PURPOSES, or research as defined by Title 2, Division 7, Article 1, Section 19003 of the California Code of Regulations, and Elections Code Section 2194 and Governmental Code Section 6254.4.

The Applicant (as principal or agent) further agrees NOT to sell, lease, loan or deliver possession of the registration information, or a copy thereof, or any portion thereof, in any form or format, to any person, organization or agency without first submitting a new application and receiving written authorization from the Solano County Registrar of Voters to release such registration information.

WILLFUL VIOLATION OF THESE PROVISIONS IS A MISDEMEANOR (ELECTIONS CODE SECTION 18109). In addition, subject to provisions of Title 2, Division 7, Article 1, Sections 19001 through 19007 of the California Code of Regulations, the Applicant agrees to pay to the State of California, as compensation for any UNAUTHORIZED USE OF EACH INDIVIDUALS REGISTRATION INFORMATION, an amount equal to the sum of fifty cents (\$.50) multiplied by the number of times each registration record is used by the Applicant in an unauthorized manner.

\_\_\_\_\_  
\*Full name of Applicant (the person, business, organization or committee for whom application is submitted)

\_\_\_\_\_  
\*Phone \_\_\_\_\_ \*E-mail \_\_\_\_\_ Date \_\_\_\_\_

\_\_\_\_\_  
\*Residence Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip Code \_\_\_\_\_

\_\_\_\_\_  
Business Address (if different than Residence Address) \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip Code \_\_\_\_\_

\_\_\_\_\_  
Mailing address (if different from above)

\_\_\_\_\_  
\*Driver's License Number (including state if not CA) \_\_\_\_\_ \*Phone Number \_\_\_\_\_

\_\_\_\_\_  
"I certify under penalty of perjury, under the laws of the State of California, that all of the above information provided by me is true and correct."

Executed at: \_\_\_\_\_  
City \_\_\_\_\_ County \_\_\_\_\_ State \_\_\_\_\_

\_\_\_\_\_  
\*Signature of applicant or agent \_\_\_\_\_ \*Print name \_\_\_\_\_ Date \_\_\_\_\_

\*For what purposes are you requesting this information? \_\_\_\_\_  
(Political research, Recall Initiative / Referendum, Scholarly research)

\*Governmental Candidate (which) \_\_\_\_\_

\*Proposed ballot measure (which) \_\_\_\_\_

Other \_\_\_\_\_

\*Intended Use of Information \_\_\_\_\_

**\*Required Information**

675 Texas Street, Suite 2600  
Fairfield, CA 94533  
(707) 784-6675  
Fax (707) 784-6678

www.solanocounty.com



# SOLANO COUNTY

## REGISTRAR OF VOTERS

### Request for Information "VBM Information File"

**IRA ROSENTHAL**

Chief Information Officer  
Registrar of Voters  
IJRosenthal@solanocounty.com  
(707) 784-6675

**JOHN H. GARDNER**

Assistant Registrar of Voters  
JHGardner@solanocounty.com  
(707) 784-3366

Select a type of file:

<input type="checkbox"/> <b>A.</b>	Vote-by-Mail Subscription service	Cumulative VBM files that are e-mail daily	<b>Cost: \$250.75</b>
<input type="checkbox"/> <b>B.</b>	Custom File (complete steps 1-5 below)	Mark desired options below.	<b>Cost: \$15.00</b>

All costs must be paid prior to receiving files.

**Step 1. Check the appropriate boxes:**

E-Mail \_\_\_\_\_  FTP: \_\_\_\_\_  
*Site Information*

**Step 2. Select File Format (choose only one):**

Flat File       Comma Delimited       Tab Delimited

**Step 3. Select Ballot Tracking (choose only one):**

Issues       Returns       Both

**Step 4. District Information (choose only one):**

Countywide       Only These Specific Precincts: \_\_\_\_\_  
 Only These Specific Districts: \_\_\_\_\_       Only These Specific Voting Consolidations: \_\_\_\_\_

**Step 5. Other Information:**

Search only      From Date: \_\_\_\_\_ / Time: \_\_\_\_\_  
these dates:      To Date: \_\_\_\_\_ / Time: \_\_\_\_\_

Include All Eligible Voters or       **ONLY INCLUDE** Perm Vote by Mail       **EXCLUDE** Perm Vote by Mail  
 Include All Political Parties or       Specific Parties: \_\_\_\_\_   
Cumulative

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**FOR OFFICE USE ONLY:**

Clerk Initials: \_\_\_\_\_ Order Date: \_\_\_\_\_ Amt Paid: \_\_\_\_\_  
Receipt #: \_\_\_\_\_ ID Verified: \_\_\_\_\_