



REGISTRAR-RECORDER/COUNTY CLERK

STREET INDEX/VOTE BY MAIL PURCHASE ORDER FORM

This agreement is between the following applicant and Los Angeles County Registrar-Recorder/County Clerk for the purpose of purchasing the street index of registered voters. Please print or type necessary information.

Applicant's Name:			DATE ORDERED				
Residence Address:							
City: State:	Zip:	Telephone: ()					
Business Address:							
City: State:	Zip:	Telephone: ()					
Complete the following if information is requested on behalf of an organization or individual other than applicant.							
Organization/Individual Name:		Telephone:	()				
Address:	City:	State:	Zip:				
Name of Individual Authorizing Applicant:							
REQUESTING QUALIFICATIONS							
Political Campaign/Committee	Academic						
Media	☐ Private Vendor ☐ Governmental						
Legal	Other						
For what purpose(s) are you requesting this information?							
Candidate(s) (list each)	Proposed ballot me	asure(s) (list each)					
Political Research	Recall						
Scholarly Research Initiative/Referendum	Governmental						
	Other						
Election: information identifying the California candidate(s) or California ballot measure(s) Candidate: information identifying federal, state, or local office							
Committee for/against any initiative or referend		identifying the California i	nitiative or referendum				
for which legal publication is made	idin incasarc. Information	identifying the editionia i	Titilative of referendant				
Political: documentation establishing affiliation with the political organization							
Scholarly: letter from a representative of the institution (professor, administrator, etc.) on the institution's letterhead stating							
that the applicant is authorized to receive the data							
Journalistic: a clear photocopy of press pass							
Explain in detail your intended use of this information. If more space is needed, continue on another sheet of paper.							

DATA F	DATA REQUESTED:							
CHECK ONE REGULAR INDEX VOTED VOTE BY MAIL								
Jurisdiction(s):								
Voting History? Yes No List election date(s)								
ORDER		CANDIDATE/COMMITTEE	OTHER	Total Price:				
1. Numb	er Copies Requested:			Total Frice.				
2. Number Registered Voters:			N/A	Date:	1 ST Payment: \$			
3. Numb	er of Pages:	N/A		Check No:	Receipt No:			
4. Price Per Page:		N/A	\$.10	Date:	2 nd Payment: \$			
5. Price I	Per Thousand Names:	\$.50	N/A	Check No:	Receipt No:			
6. Handli	ing Charge:	N/A	\$1.60					
7. Total:		\$	\$	PAYMEN	IT NON-REFUNDABLE			
NOTE:	The Registrar-Recor	der/County Clerk is not res	sponsible for mate	rials which are lost o	r damaged in the mail.			
For requests made by mail, applicants must also include a copy of their driver's license.								
Please be sure the driver's license number, address, and birth date are legible.								
Applicant and beneficiary, if applicable, hereby agree that the information set forth in the voter registration records will be used for the approved purposes, consistent with state law, as defined by Elections Code section 2194, California Code of Regulations section 19003, and Government Code section 6254.4.								
Initial	Applicant and beneficiary, if applicable, further agree 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 Secretary of State to release such registration information.							
Initial	Applicant and beneficiary, if applicable, agree to maintain information in a secure and confidential manner and notify the Secretary of State immediately of any violation or breach.							
Initial	Applicant and beneficiary, if applicable, understand that it is a misdemeanor for a person in possession of voter registration information to use or permit the use of all or any part of the information for any purpose other than as permitted by law. (Elections Code section 18109)							
Applicant and beneficiary, if applicable, agree to pay to the State of California, as compensation for any unauthorized use of each individual's 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 and/or the beneficiary, if applicable, in an unauthorized manner. (California Code of Regulations sections 19001-19009)								
I certify under penalty of perjury, under the laws of the State of California, that all of the information provided on this application is true and correct.								
Executed	on	at		(oit A				
(date) at (city)								
Applicant's Name (printed) Driver's License Number:								
Signature of Applicant:								
Office I	Use Only App	roved Denied D	By:		Date:			
Receipt # Picked up on Check # Paid Cash Mailed on								