



Delaware Tribe of Indians Candidate “Voter/Membership List” Order Form

I hereby request a voter/membership list on electronic media to be used in conjunction with the 2016 Delaware Elections.

Declared Candidate for (seat) : _____ Delaware Registration #: _____

Full Name: _____
First Middle Last Maiden (& previously married name(s) if any)

Address: _____
City State Zip

Telephone #: _____ E-mail address: _____

Order media type (check all that apply):

_____ paper list @ \$25.00 per _____ flash drive @ \$25.00 per _____ disk @ \$25.00 per

MAKE ALL CHECKS PAYABLE TO DELAWARE ELECTION BOARD

*******IMPORTANT NOTICE TO CANDIDATE*******

Candidate agrees to keep confidential all personally identifiable information. Media/information is to be used only for the 2016 election/campaign cycle. Candidate agrees media/information is not to be resold or used for any other purpose.

Candidate Signature: _____ Date: _____

All request forms must be mailed to:

**Delaware Election Board
P.O. Box 1198
Bartlesville, OK 74005**