



## CITY OF PROVIDENCE

Renay Brooks Omisore, Chairperson

Mercedes "Betty" Bernal, Clerk

Rochelle Lee, Commissioner

### APPLICATION FOR VOTER LIST

DATE REQUESTED: \_\_\_\_\_

NAME: \_\_\_\_\_

ADDRESS: \_\_\_\_\_

TELEPHONE: \_\_\_\_\_ EMAIL: \_\_\_\_\_

#### I WOULD LIKE THE LIST OF REGISTERED VOTERS FOR:

\_\_\_\_\_ City Wide (not available via email) \_\_\_\_\_ State Representative District # \_\_\_\_\_

\_\_\_\_\_ State Senate District # \_\_\_\_\_ \_\_\_\_\_ City Council Ward # \_\_\_\_\_

\_\_\_\_\_ School Board Region # \_\_\_\_\_

\_\_\_\_\_ Check here if you would like voter history from the last eight elections.

**\*If you are requesting a State Senate or State Representative list, the list will only contain Voters that are registered in Providence.**

#### Format (please check one):

\_\_\_\_\_ **USB (storage device)**

\_\_\_\_\_ **E-MAIL (please provide email address above)**

**The cost of the list is \$25.00.**

We must receive payment in full before we can process your request. Please mail this application along with your check or money order payable to the "City Collector" to:

Providence City Hall  
Board of Canvassers  
25 Dorrance Street, Room 102  
Providence, RI 02903