Lisa LewisSupervisor of Elections County of Volusia

To submit by fax:

(386) 822-5715



1750 S. Woodland Blvd. DeLand FL 32720 Phone: (386) 736-5930

Voter Registration Order Form

ALL ORDERS MUST BE PAID FOR AT TIME OF PICKUP. MAKE CHECKS PAYABLE TO VOLUSIA COUNTY SUPERVISOR OF ELECTIONS.					
OFFICE USE OF	<u>NLY</u>				
DATE PAID		PAYMENT	TYPE: CASH	CHECK	CHECK #
PRIMARY FEE			GENERAL FEE		
TOTAL COST		AMOUNT PAID		BALANCE D	UE
NAME:				DATE:	
ADDRESS:					
	CITY/ZIP: PHONE #:				
EMAIL ADDRES	SS:				
OUTPUT SELEC	TION: (select one)	USB Thumb Er	mail Web Services	I I I I I I	Maps
VOTER SELECT	ION: (select one)	Active Voters	All Eligible Voters (Includes Active & (Inactive Voters)	(Voted i	Super Voters in all of the last four General Elections)
RECORD SELEC	CTION:(specify)	Countywide			
Congressional	Senate	_ House Cou	inty Council District	School	Board District
Municipality (if applicable Zone/District) Individual Precincts					
Party Affiliation:	All D	em 🔲 Rep 🔲	NPA Mino	or (Specify)	
Voter History To select a specific	c Election(s), refer to	Voter History List			
SORT OPTIONS	6: (select only one)				
Name (Alpha Order)	Name by Precinct (Alpha)		"To the [Las	t Name] house	hold at" 🗍
Residence Address	Residence Address by Precinct	Zip Code 🗌		istered Voters a er household)	ut"
To submit by mail:	·	Supervisor of Elections dland Blvd., DeLand, FL	32720-7915		

Revised: January 19, 2021