



## Fergus County Elections Office Voter List Request



AN ELECTOR MAY FILL OUT THIS FORM OR GO ONLINE TO SOSMT.GOV IN ORDER TO REQUEST A VOTER REGISTRATION LIST

I, (print name) \_\_\_\_\_, hereby request the information below for a list of registered voters for:

- All of Fergus County
- Precinct (s): \_\_\_\_\_ Name of Precinct (s)
- District (s): \_\_\_\_\_ Name or type of District (s)
- Other – Specify: \_\_\_\_\_

**PLEASE CIRCLE YOUR CHOICE:**

**Active & Inactive**

**Active Only**

**Inactive Only**

**FEES: System generated at the time of report ran.** Payment must be received before information will be handed over.

\_\_\_\_\_ List only      Hard Copy or Email - Circle choice

\_\_\_\_\_ Labels only      Hard Copy or Email - Circle choice

\_\_\_\_\_ Both      Hard Copy or Email - Circle choice

**I understand that the item(s) furnished are for *Noncommercial Use*, as required by Section 13-2-122, MCA. By signing, the signor agrees the information furnished shall be for noncommercial use:**

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date

Phone: \_\_\_\_\_

Email: \_\_\_\_\_

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