4人スへス**〇 ELECTIONS VOTER REGISTRY REQUEST**

If you have questions, please call (877) 560-5286.

Last Name				
Last Name	First Na	me	E-mail Add	ress
Phone Number	Mailing	Address		
Reason for request:				
TYPE OF LIST			EMAIL	
All Osage Voters			<u></u> \$10	
Election Voters (Lists will be split into Absentee and Walk In.) \$10 EACH 2014 Primary2014 General2016 General2017 Special 2018 General2020 General				
names and addres	Voters for ALL Elections (ses, will not be split into A e Elections voted in.)	-	<u>\$10</u>	
Partial List (Charge is per List Requested) Describe List:			\$5	
List Updates			<u>\$</u> 5	
New Members From: (Date) To: (Date)				
*No personal checks accepted. Money Order, Cashier's Check, Campaign Account Check, or Cash \$20 and under ONLY.				
I understand that the Osage Nation Election Board is required by law to furnish copies of current registration lists of names and addresses of registered voters in his or her possession to any qualified Osage Nation Voter upon request. I also understand due to the Privacy Program in place, some names and addresses of voters have been removed from these lists. By signing this request, you are agreeing to be a qualified Osage Nation Voter and acknowledge you are allowed this information, PROVIDED: That such list be used only for political purposes and shall not be used for commercial purposes. Use of a voter registry after a period of one (1) year from the date of the request is prohibited and is subject to punishment pursuant to Rule Two, Section 5(D) of the Osage Nation Election Board Rules and Regulations Governing Elections. If a complaint is made regarding the use of the Osage Nation Voter Registry for commercial purposes, the complainants will be referred to either the Osage Nation Police Department or Osage Nation Prosecutor.				
F			FOR ELECTION OFFICE USE ONLY	
Signature				
Date TOTAL COS			T: \$	
RETURN THIS FORM BY: Mail: Osage Nation Election Office P.O. Box 928 Pawhuska, OK 74056 In Person: NOT a mailing address. 608 Kihekah Pawhuska, OK		RECEIPT #: CASH AMOUN CASHIER'S CHE FORMS OF ID C	CASH AMOUNT: CASHIER'S CHECK/MONEY ORDER #: FORMS OF ID CHECKED: Membership Card	
			nent Issued Photo	ID