



COUNTY OF SACRAMENTO VOTER REGISTRATION AND ELECTIONS Map Request Form

Name of Applicant/Agent:	Last	First	Middle	
Business Address:		City	State	Zip Code Business Telephone
Mailing Address: (If different from above)		City	State	Zip Code Alternate Telephone
Name of Candidate/Committee /Organization:				

MAP AREA: Select

- Entire County
- District Name: _____ District Number / Area (if applicable): _____

MAP CONTENT: Select One

- Sacramento County Boundary District
- District Boundary Only
- Precinct Boundaries (Regular)
- Consolidated Precincts- specify election: _____

MAP SIZE: Select One

- 24" x 36" (Entire County and some districts will automatically be printed on larger size by default)
- 36" x 48"

MAP PRICING/FORMAT:

\$125.00 Setup fee required for each order, *includes PDF, printed maps are additional
+ \$10.00 Quantity: _____ (Up to 3 identical maps priced at \$10.00 each. Must be requested at same time)
 *PDF (no cost) emailed to: _____

STANDARD SHAPEFILE: Some district data available for download at www.sacqis.org

CUSTOM REQUEST: Please explain below or include on additional page. Our office will contact you regarding your custom request.

\$275.00 includes one printed map of any size

Purchasers are advised that maps produced by Voter Registration and Elections are for display purposes only and independent verification of data and boundaries should be obtained by the user. The County of Sacramento does not warrant the accuracy or completeness of maps and disclaims liability for their fitness for use. Maps purchased from Voter Registration and Elections may not be reproduced or resold without the express written consent of Voter Registration and Elections.

Payment must be received in full prior to any maps being made. Your order will be ready within 72 business hours after approved request and received payment in full (unless otherwise noted). All printed maps must be picked up within 30 days.

You may return this form to our office by mail to: County of Sacramento, Voter Registration & Elections, 7000 65th Street, Suite A, Sacramento, CA 95823 or by email at: voters-campaignservices@saccounty.net

Signature: _____ **Date:** _____

Official Use

Received By: _____ Date: _____ In Person Delivery Email Payment Received: Yes No Receipt No. _____