

**Department of the Secretary of State
Central Voter Registration (CVR) Project
Request for Payment for Data Entry of Voter Records**

Unencumbered Contract Number U067806204

Municipality Information (for jurisdiction that performed data entry):

Name of Municipality: _____

Name of Clerk/Registrar: _____

Telephone: _____

Mailing Address: _____

This is a request for payment for services rendered, for manual data entry of voter registration records into the Secretary of State's interim data entry tool.

We have entered the following number of voter records: _____ for the municipality/
unorganized township of _____ at a rate of \$0.50 per record, for a total
payment due of \$_____. _____. We understand that payment will be issued upon verification and
entry of the records into the *ElectioNet*TM (CVR) system.

Signature of Municipal Official: _____ **Date:** _____

Please submit this request, by mail to:

Bureau of Corporations, Elections and Commissions
ATTN: Andrea Sparrow
101 State House Station
Augusta ME 04330-0101

Or, by FAX to: 287-5428 or 287-6545