

REQUEST TO DESTROY UNUSED ELECTION MATERIALS (101.545, F.S.)

(SUBMIT FORM TO DIVELECTIONS@DOS.MYFLORIDA.COM)



SECTION 1 – SUPERVISOR OF ELECTIONS REQUEST

Name/Title	
Jurisdiction	
Address	
Email Address	
Name of Election(s)	
Date of Election(s)	
Volume	
Unused materials (type(s))	
<input type="checkbox"/>	10-day contest of election period has expired.
<input type="checkbox"/>	Materials are unused.
<input type="checkbox"/>	Attached is an electronic file or hard copy of an example of the Primary or General Election Ballot, as applicable to the request.
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Signature	Date Submitted

SECTION 2 – DIVISION OF ELECTIONS' REVIEW

<input type="checkbox"/>	County Supervisor of Elections or municipal clerk that conducted election (or deputy thereof) signed request.
<input type="checkbox"/>	An electronic file or hard copy of an example of the Primary Ballot or General Election, as applicable to the request is attached.

SECTION 3 – DIVISION OF ELECTIONS' APPROVAL

The request is approved pursuant to section 101.545, Florida Statutes.		
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Name	Signature	Date
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Title (Director or Assistant Director)		