

REQUEST FOR EXEMPTION FROM PUBLIC RECORDS

Florida Statute 119.071 provides that records of the following persons and their spouses and children are exempt from disclosure of public records, if so requested:

- active or former law enforcement personnel, including correctional and correctional probation officers;
- personnel of the Department of Children and Family Services whose duties include the investigation of abuse, neglect, exploitation, fraud, theft, or other criminal activities;
- personnel of the Department of Health whose duties are to support the investigation of child abuse or neglect;
- personnel of the Department of Revenue or local governments whose responsibilities include revenue collection and enforcement or child support enforcement;
- firefighters;
- justices of the Supreme Court, district court of appeal judges, circuit court judges, and county court judges;
- current or former state attorneys, assistant state attorneys, statewide prosecutors, or assistant statewide prosecutors;
- current or former human resource, labor relations, or employee relations directors, assistant directors, managers, or assistant managers of any local government agency or water management district whose duties include hiring and firing employees, labor contract negotiation, administration, or other personnel-related duties;
- current or former United States attorneys and assistant United States attorneys;
- current or former judges of United States Courts of Appeal, United States district judges, and United States magistrate judges; and
- current or former code enforcement officers.

By filing the following application, you are authorizing the Volusia County Supervisor of Elections to exclude from public records your home address and phone number and that of your spouse and children, as listed below, who are registered voters in Volusia County.

PLEASE PRINT

FULL NAME _____

STREET ADDRESS _____

CITY _____ ZIP _____

MAILING ADDRESS _____

CITY _____ ZIP _____

DATE OF BIRTH _____ OCCUPATION _____

SPOUSE'S NAME _____ DOB _____

CHILD(REN) NAMES _____ DOB _____

_____ DOB _____

_____ DOB _____

YOUR SIGNATURE _____ DATE _____

**Return Completed Form To:
Ann McFall, Supervisor of Elections
Volusia County Department of Elections
125 West New York Avenue
DeLand, Florida 32720-5415**