

CANCELLATION FORM

REMOVE FROM PULASKI COUNTY VOTER REGISTRATION

REASON FOR REMOVAL FROM PULASKI COUNTY VOTER REGISTRATION: PLEASE CHECK ONE

Moved Out Of State / County

Voter's Request

Deceased

PLEASE PRINT

Name of Voter Being Cancelled: _____
First, M., Last

Pulaski County Address Only: _____
Street Address

City, State, Zip

Contact Telephone Number: _____

Date of Birth: _____
MM/DD/YY

Last Four Digits of Social Security Number: XXX-XX- _____

Signature

Date

TERRI HOLLINGSWORTH
Pulaski Circuit/County Clerk
Voter Registration Department
P.O. Box 2659
Little Rock, AR 72203-9444
Office (501) 340-8336 Fax (501) 421-9255
www.pulaskiclerk.com