

# 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  
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