

**Pulaski Circuit County Clerk
Department of Voter Registration**

401 W. Markham, Little Rock, AR 72201
P.O. Box 2659, Little Rock, AR 72203-9444
Phone: 501-340-8336
Fax: 501-340-3342

OFFICE USE ONLY

Date Submitted: _____
Media Type: _____
Date Processed: _____
Number of Voters: _____
Processed by: _____

VOTER DATA REQUEST FORM

Individual/ Organization Name:	Address (if Mailed):
---------------------------------------	-----------------------------

Phone:	Email Address:
---------------	-----------------------

*Requests are completed 48 hours from submission of completed form.
*Note: If submitted after 2:00 pm, requests will not be processed until the following business day.
*Current Election requests cannot be processed until voting history has been updated.
*Requestor must have access to **compatible software** to process electronic files.
(Forms available at www.pulaskiclerk.com)

Media Provided and Cost:

___ Email: No Charge
___ CD: No Charge
___ Paper: \$0.50 first page, \$0.25 each page thereafter

Please Indicate Data Requested Where Applicable:

Voter Information:
___ Active Voters ___ Inactive & Active Voters ___ Countywide or Areas Within (Specify) _____
___ Name ___ Address ___ Mailing Address ___ Phone ___ Party ___ Registration Date ___ Other _____

Voting History:
___ None Voted in ___ of last ___ elections (limit 20) Specific Elections _____

Voter History Special Request:

Under Arkansas law, source of information cannot be provided.

Payment is due upon receipt. We accept cash, checks, and credit cards payable to Pulaski Circuit County Clerk.