

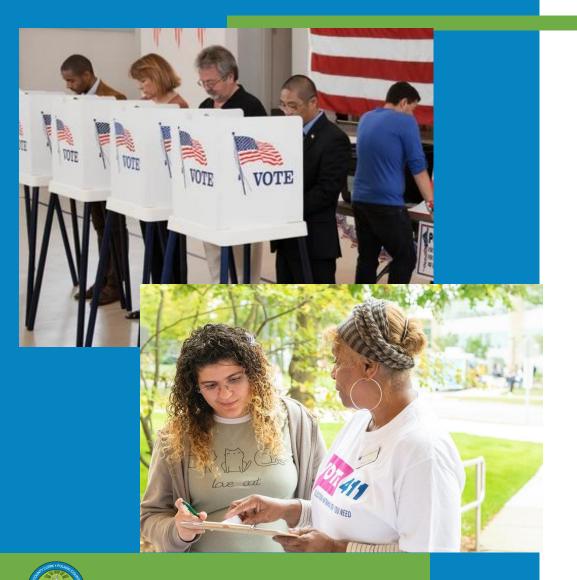
# Training with the Clerk

A voter registration training for the community

Presented by:

Pulaski Circuit and County Clerk's Office and Pulaski County Election Commission August 28 and September 12, 2024





## Agenda

**Election Dates to Remember** 

**Voter Registration Process** 

- 3 Ways to Vote
  - Absentee Voting
  - Early Voting
  - **Election Day Voting**
- **Election Misinformation**

# 2024 ELECTION INFORMATION



### GENERAL ELECTION 2024 Key Election Dates to Remember

### **OCTOBER 7**

Last day to register to vote to be eligible to vote in the General Election.

### **OCTOBER 21**

Early voting begins 8 am - 6 pm (Monday - Friday) and 10 am - 4 pm (Saturday) at early voting locations.

First day for designated bearers to pick up absentee ballots in person from the Clerk's Office.

### **OCTOBER 29**

Deadline for Clerk's Office to receive an absentee ballot application request by mail, fax, or electronic mail.

### **NOVEMBER 1**

Last day to transfer voter registration from county to county.

Deadline to request an absentee ballot application **and** return the absentee ballot in person or by designated bearer to the Clerk's Office by 5 pm.

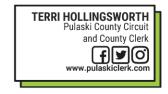
### **NOVEMBER 4**

Early voting ends at 5 pm.

### **NOVEMBER 5**

Election Day, polls open from 7:30 am - 7:30 pm.





Created in-house by the Pulaski Circuit and County Clerk's office

# Voter Registration





### To register to vote in the State of Arkansas

- Be a U.S. citizen
- Be an Arkansas resident
- Be age 18 or turn 18 on or before the next election
- Not be a convicted felon whose sentence has not been discharged or pardoned

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# NEW VOTER REGISTRATION

### TIPS

- **#1:** Complete the form in black or blue ink only
- **#2:** Make sure the highlighted areas are completed
- **#3:** Be sure to sign the form
- **#4:** Return completed forms to:
  - Pulaski County Circuit and County Clerk
  - 401 West Markham Street Little Rock, Arkansas 72201

2       (Rural addresses must draw map.)       Intervention				AS VOT	R R	FG	21	TRATIO		CATI		
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PLEASE PRINT AND USE BLACK INK TO COMPLETE

Please complete the sections below if:

You were previously registered in another county or state, or

You wish to change the name or address on your current registration.

MAIL REGISTRANTS: PLEASE SEE SECTION D.

Agency Code (For Official Use Only)

Rev. 6-13-17

# ADDRESS CHANGE

### TIPS

- **#1:** Complete the form in black or blue ink only
- **#2:** Make sure the highlighted areas are completed
- **#3:** Be sure to sign the form
- #4: Return completed forms to: Pulaski County Circuit and County Clerk
  401 West Markham Street Little Rock, Arkansas 72201

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<ul> <li>7</li> <li>ID Number - Check the applicable box and provide the appropriate number. Arkansas Driver's license number Arkansas Driver's license number I tyou do not have a driver's license provide the last 4 digits of social security number I have neither a driver's license nor social security number.</li> <li>(A) Are you a citizen of the United States of America and an Arkansas resident? Yes No (B) Will you be eighteen (18) years of age or older on or before election day? Yes No (C) Are you presently adjudged mentally incompetent by a court of competent jurisdiction? Yes No (D) Have you ever been convicted of a felony without your sentence having been discharged or pardoned? Yes No If you checked No in response to either questions A or B, do not complete this form.</li> </ul>	4	Date of	f Birth	/_	Dav	/	'ear	5		e & Work	< Pho		onal)		6	Party Affi	liation (C	ptional)
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# RESTORATION OF VOTING RIGHTS

### **Steps to Restore**

**#1:** been discharged from probation or parole

**#2:** paid all probation or parole fees

**#3:** satisfied all terms of imprisonment

**#4:** paid all applicable court costs, fines, or restitution

Refer to Voter Registration Dept. for more details (501) 340-8336 or vrcr@pulaskiclerk.com





# CHECK VOTER STATUS

- **State:** Congressional District, State Senate, State Representative
- **County:** Judicial District, Justice of Peace, Township
- **City:** Municipality, City Council/Director, School Board zone

### Check voterview for sample ballot too



# **VOTER REGISTRATION** TOOLKIT

Pick up a Toolkit Voter Dept. in the Courthouse

For more information contact Ternesha Womack Email: twomack@pulaskiclerk.com

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#1: Complete the form in black or blue ink #2: Yellow highlighted areas must be completed #3: Areas #5 and #7 are optional vet highly encouraged #4: Be sure to sign the form

VOTER REGISTRATION ADDRESS CHANGE SAMPLE

Tips to R #1: Complete the form in black or blue ink #2: Yellow highlighted areas must be completed #3: Areas #5 and #7 are optional yet highly encouraged #4: Be sure to sign the form



### **VOTER REGISTRATION**

**Toolkit Packet** 

	GENERAL ELECTION
2	024 Key Election Dates to Remember
	OCTOBER 7
Last day	to register to vote to be eligible to vote in the General

OCTOBER 21 begins 8 am - 6 pm (Monday - Friday) and 10 am - 4 pm t early voting locations. First day for designated bearers to pick up ab from the Clerk's Office.

OCTOBER 29 eadline for Clerk's Office to receive an absentee ballot application quest by mail, fax, or electronic mail.

NOVEMBER 1 Last day to transfer voter registration from county to county. Deadline to request an absentee ballot application and return the absent ballot in person or by designated bearer to the Clerk's Office

NOVEMBER Early voting ends at 5 pm.

NOVEMBER 5 lection Day, polls open from 7:30 am - 7:30 pn



nfirm your address, part



PROVIDE TO T COUNTY CLERI elony the unique occortunity to have the Ark, Code Artn. Ameng, 52 51116/V2NA-DI STEPS TO RESTORING VOTING

local agencies that all of the requirements have been completed <u>OR</u> proof that the researches been completed.

2: Submit proof to the Voter Registration Department of the county clerk's office where the returning citizen now resides. 3: Complete an Arkansas Voter Resistratio

RIGHTS

1: Obtain proof fr







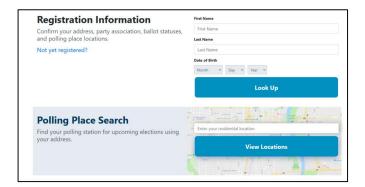


# 3 ways to vote



# SAMPLE BALLOTS

Arkansas law requires all sample ballots to be uploaded to voter view no later than October 16







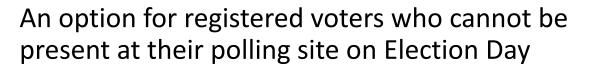


# **ELIGIBLE PHOTO IDs**

- An Arkansas state-issued driver's license
- An Arkansas state-issued photo identification card
- An Arkansas state-issued concealed handgun carry license
- A United States passport
- An employee badge or identification document issued by an accredited postsecondary education institution in the State of Arkansas (UAMS, UA Little Rock, UA PTC) or trade school
- A United States military identification document
- A public assistance identification card if the card shows a photograph of the person to whom the document or identification card was issued;
- A voter verification card



## WHAT IS ABSENTEE VOTING IN ARKANSAS?















# ACT 141

Allows voters to cast their vote by absentee due to observance of a religious discipline or religious holiday.

# ACT 320

Absentee ballot voter will now be required to include the name, address, and signature of anyone giving them assistance in filling out the absentee ballot application and the ballot itself.

# NEW ABSENTEE REQUEST FORM

Make sure to submit the new 2page absentee ballot application form and NOT the one-page

ARKANSAS APPLICATION FOR ABSENTEE BALLOT FOR OFFICE U	ONLY SECTION 4: PLEASE SELECT HOW YOU	WISH TO RECEIVE YOUR BALLOT: FOR OFFICE US
Revised 08/2023 DATE:	<ul> <li>I will pick up my ballot from the operational statements of the statement of t</li></ul>	
REGISTRANT ID:	□ Email ( <b>Only</b> available for UOCA' Email address:	VA voters). REGISTRANT ID:
TO COUNTY CLERK: PRECINCT:	Mail. Please send my ballot to the	following address: PRECINCT:
Information and Tips for Completing the Absentee Ballot Application	Picked up via Designated Bearer,	Administrator. or Authorized Agent:
<ul> <li>Complete both pages of the application.</li> <li>Complete all fields, then sign and date the application. Failure to do so will result in delays in receiving your a Read all notes and acknowledgements included on the application.</li> </ul>		
<ul> <li>Double check all selections and information provided before submitting your application.</li> </ul>	Printed Name of Bearer/Administrator/	Agent Signature of Bearer/Administrator/Agent
<ul> <li>If applicable, ensure the designated bearer, administrator, or authorized agent has signed the application in Sec</li> <li><u>UOCAVA</u>: The Uniformed and Overseas Citizen Absentee Voting Act. UOCAVA voters are U.S. citizens with the second second</li></ul>	Note: A designated bearer may obtain	or deliver absentee ballots for no more than two (2) voters per election and may o
military personnel, their eligible family members, and overseas citizens away from their normal polling location	within the 15 days before a school elect	ion, special election, preferential primary election, or general election OR the 7 da or, or authorized agent must provide a current and valid photo ID to the county
<ul> <li>Return your application to your county clerk via mail, fax, email, or hand delivery.</li> <li>If you have questions on how to complete this application, please contact your local county clerk's office.</li> </ul>		picking up or delivering an absentee ballot.
	SECTION 5: PLEASE INDICATE WHETHE	R OR NOT YOU RECIEVED ASSISTANCE IN COMPLETING THIS AP
COMPLETE ALL 6 SECTIONS OF THE APPLICATION		ion for Absentee Ballot on my own with no assistance.
SECTION 1: PLEASE SELECT A REASON FOR REQUESTING AN ABSENTEE BALLOT:	□ I, the applicant, received assistance in If <b>YES</b> , the person giving assistance m	filling out this Application for Absentee Ballot. ust complete the information below:
<ul> <li>I will be unavoidably absent from my polling site on Election Day, OR</li> <li>I will be unable to attend the polls on Election Day because of an illness or physical disability, OR</li> </ul>		
I am a resident of a long-term care or residential facility licensed by the state, OR	Printed Name of Person Giving Assistance	Signature of Person Giving Assistance
I will be unable to attend the polls on Election Day due to an observance of a religious discipline or religious holi	Finder value of Person Grying Assistance	Signatic of Person Siving Assistance
SECTION 2: PLEASE SELECT FROM THE FOLLOWING OPTIONS CONCERNING YOUR RESIDENCE:		
I currently reside within the county in which I am registered to vote.	Residential Address of Person Giving Assis	ance
<ul> <li>I currently reside outside of the county in which I am registered to vote.</li> <li>I am a United States citizen residing outside of the territorial limits of the United States (UOCAVA).</li> </ul>		
I am an active service member of the United States armed services residing outside of the county (UOCAVA).     I am a spouse or dependent of an active service member of the United States armed services (UOCAVA).	SECTION 6: PLEASE COMPLETE ALL IN	FORMATION BELOW AND SIGN THE APPLICATION:
I am a spouse or dependent of an active service memoer of the United States armed services (UUCAVA).  SECTION 3: PLEASE SELECT THE ELECTION IN WHICH YOU WISH TO CAST AN ABSENTEE BALLOT:		st of my knowledge under penalty of perjury. If I have provided false information dollars (\$10,000) or imprisonment for up to ten (10) years, or both, under federal
Preferential Primary/Nonpartisan Judicial General (held in the spring of even-numbered years).	penalty of perjury that I am registered to vote, an	
Party Preference (Check Only One):		
<ul> <li>Democratic (Ballot will contain democratic, nonpartisan judicial, and special/school races, if applicable</li> <li>Republican (Ballot will contain republican, nonpartisan judicial, and special/school races, if applicable</li> </ul>	Printed Name of Absentee Voter	Date of Birth of Absentee Voter
<ul> <li>Nonpartisan (Ballot will contain <u>only</u> nonpartisan judicial, and special/school races, if applicable).</li> </ul>	Third Name of Abarine Vole	bare of bir in of Absence voter
November General Election/Nonpartisan Judicial Runoff:     Annual School Election.		
Annual School Election     Special Election to be held on (Date).	Residential Address of Absentee Voter	Phone Number of Absentee Voter
You may qualify for:		
<ul> <li>All elections for one calendar year (i.e., today's date through December 31<sup>st</sup> of the current year).</li> </ul>		
<ul> <li>In order to qualify for this option, you must be a voter with a disability, in a long-term or residential outside of the county in which you are registered to vote.</li> </ul>	facility, or living City, State, and Zip Code	Signature of Absentee Voter
All elections through the next Federal General Election Cycle.		
<ul> <li>In order to qualify for this option, you must be a UOCAVA voter (See Section 2 on front page).</li> </ul>	Email Address of Absentee Voter	
	YOU MAN DETUDN THE ADDI ICATION	TO YOUR LOCAL COUNTY CLERK VIA MAIL, FAX, EMAIL OR HAND DELI
Pleas	ontinue to Page 2	TO TOOK DOCKD COONTT CLERK TA MAIL, FAA, EMAID OK HATD DEDI



### COMPLETE ALL 6 SECTIONS OF THE APPLICATION

### SECTION 1: PLEASE SELECT A REASON FOR REQUESTING AN ABSENTEE BALLOT:

- I will be unavoidably absent from my polling site on Election Day, OR
- I will be unable to attend the polls on Election Day because of an illness or physical disability, OR
- I am a resident of a long-term care or residential facility licensed by the state, OR
- □ I will be unable to attend the polls on Election Day due to an observance of a religious discipline or religious holiday.

### WHY are you requesting an absentee ballot?

### SECTION 2: PLEASE SELECT FROM THE FOLLOWING OPTIONS CONCERNING YOUR RESIDENCE:

- I currently reside within the county in which I am registered to vote.
- I currently reside outside of the county in which I am registered to vote.
- □ I am a United States citizen residing outside of the territorial limits of the United States (UOCAVA).
- I am an active service member of the United States armed services residing outside of the county (UOCAVA).
- I am a spouse or dependent of an active service member of the United States armed services (UOCAVA).

### WHERE are you currently residing?



#### SECTION 3: PLEASE SELECT THE ELECTION IN WHICH YOU WISH TO CAST AN ABSENTEE BALLOT:

- Preferential Primary/Nonpartisan Judicial General (held in the spring of even-numbered years). Party Preference (Check Only One):
  - Democratic (Ballot will contain democratic, nonpartisan judicial, and special/school races, if applicable).
  - **Republican** (Ballot will contain republican, nonpartisan judicial, and special/school races, if applicable).
  - □ Nonpartisan (Ballot will contain <u>only</u> nonpartisan judicial, and special/school races, if applicable).
- November General Election/Nonpartisan Judicial Runoff.
- Annual School Election.
- Special Election to be held on \_\_\_\_\_(Date).

### WHICH absentee ballot are you requesting?

#### You may qualify for:

- All elections for one calendar year (i.e., today's date through December 31st of the current year).
  - In order to qualify for this option, you must be a voter with a disability, in a long-term or residential care facility, or living outside of the county in which you are registered to vote.
- □ All elections through the next Federal General Election Cycle.
  - In order to qualify for this option, you must be a UOCAVA voter (See Section 2 on front page).

### WHICH option do you qualify for?



#### SECTION 3: PLEASE SELECT THE ELECTION IN WHICH YOU WISH TO CAST AN ABSENTEE BALLOT:

- Preferential Primary/Nonpartisan Judicial General (held in the spring of even-numbered years). Party Preference (Check Only One):
  - Democratic (Ballot will contain democratic, nonpartisan judicial, and special/school races, if applicable).
  - Republican (Ballot will contain republican, nonpartisan judicial, and special/school races, if applicable).
  - □ Nonpartisan (Ballot will contain <u>only</u> nonpartisan judicial, and special/school races, if applicable).
- November General Election/Nonpartisan Judicial Runoff.
- Annual School Election.
- Special Election to be held on \_\_\_\_\_ (Date).

### WHICH absentee ballot are you requesting?

#### You may qualify for:

- □ All elections for one calendar year (i.e., today's date through December 31<sup>st</sup> of the current year).
  - In order to qualify for this option, you must be a voter with a disability, in a long-term or residential care facility, or living outside of the county in which you are registered to vote.
- □ All elections through the next Federal General Election Cycle.
  - In order to qualify for this option, you must be a UOCAVA voter (See Section 2 on front page).

### WHICH option do I qualify?



I will pick up my ballot from the office of the county clea Email ( <u>Only</u> available for UOCAVA voters). Email address:	έk.	DATE:
Mail. Please send my ballot to the following address:		PRECINCT:
Picked up via Designated Bearer, Administrator, or Auth	orized Agent:	
		Aministrator/A gent
 Picked up via Designated Bearer, Administrator, or Auth	orized Agent:	dministrator/Agent



### **HOW** do you want to receive your ballot?

#### SECTION 5: PLEASE INDICATE WHETHER OR NOT YOU RECEIVED ASSISTANCE IN COMPLETING THIS APPLICATION:

- □ I, the applicant, filled out this Application for Absentee Ballot on my own with no assistance.
- I, the applicant, received assistance in filling out this Application for Absentee Ballot. If YES, the person giving assistance must complete the information below:

Printed Name of Person Giving Assistance

Signature of Person Giving Assistance

Complete **ALL** sections

Residential Address of Person Giving Assistance

<b>WHO</b> helped	you comp	lete this f	form?
-------------------	----------	-------------	-------

SECTION 6: DI EASE COMDUET	T ALL INFORMATION RELO	W AND SIGN THE APPLICATION:
SECTION 0. FLEASE COMFLET	E ALL INFORMATION DELU	WAND SIGN THE AFFLICATION.

The information I have provided is true to the best of my knowledge under penalty of perjury. If I have provided false information, I may be guilty of perjury and subject to a fine of up to ten thousand dollars (\$10,000) or imprisonment for up to ten (10) years, or both, under federal law. I certify under penalty of perjury that I am registered to vote, and that I am the person who is registered to vote.

Printed Name of Absentee Voter

Date of Birth of Absentee Voter

**Residential Address of Absentee Voter** 

Phone Number of Absentee Voter

City, State, and Zip Code

Signature of Absentee Voter

Email Address of Absentee Voter



# **AVOID ABSENTEE** BALLOT **REJECTION**

The Absentee Ballot Application must match the Absentee Voter Statement

		SECTION 4: PLEASE SELEC
ABSENTEE V	DTER STATEMENT	I will pick up my b     Email ( <u>Only</u> availa)     Email address:
THIS VOTER STATEMENT SHALL B	E COMPLETED AND RETURNED IN THE ENTEE BALLOT WILL NOT BE COUNTED	Mail. Please send m
REQUIRED FOR ALL VOTERS	These Questions Apply to Some Voters	Little Rock
VOTER'S PRINTED NAME Terri Smith	Did you ask someone to return this ballot for you? <u>IF YES</u> , this box <u>MUST BE COMPLETED</u> for your ballot to count:	<ul> <li>Picked up via Desig</li> </ul>
MUST COMPLETE FOR YOUR BALLOT TO BE COUNTED!	Printed Name of Designated Bearer, Agent, or Administrator	Printed Name of Bearer/
VOTER'S RESIDENTIAL VOTING ADDRESS	Signature of Designated Bearer, Agent, or Administrator	Note: A designated bear within the 15 days before
I CERTIFY THIS IS THE PHYSICAL ADDRESS (IN ARKANSAS) AT WHICH I RESIDE <sup>+</sup> AND IS THE SAME ADDRESS I LISTED ON MY APPLICATION FOR AN ABSENTEE BALLOT	Address of Designated Bearer, Agent, or Administrator	a runoff election. A beau must sign the register, un
123 Main St	City State Zip Code	SECTION 5: PLEASE INDICA
Street Address Little Rock 72201	Did you request your ballot be mailed to an address other than your residential address? If yes, provide that mailing address:	<ul> <li>I, the applicant, filled or</li> <li>I, the applicant, received</li> <li>If <u>YES</u>, the person givin</li> </ul>
City State Zip Code Must Complete for Your Ballot to be Counted!	Street Address or P.O. Box	Printed Name of Person G
VOTER'S DATE OF BIRTH	City State Zip Code	
November 03 2002	Did someone help you fill out your ballot? If yes, complete this box:	Residential Address of Pers
Month Day Year MUST COMPLETE FOR YOUR BALLOT TO BE COUNTED!	Name of Person Giving Assistance	SECTION 6: PLEASE COMPL
THE INFORMATION I HAVE PROVIDED IS TRUE TO THE I	E VOTER STATEMENT BEST OF MY KNOWLEDGE UNDER PENALTY OF PERJURY. IF I CT TO A FINE OF UP TO TEN THOUSAND DOLLARS (\$10,000)	The information I have provided is perjury and subject to a fine of up to penalty of perjury that I am register Terri Smith
Terri Smith	YOU MUST <u>SIGN HERE</u> FOR YOUR BALLOT TO BE COUNTED! [THIS SIGNATURE WILL BE COMPARED TO YOUR	Printed Name of Absentee Voter
Signature of Absentee Voter	ABSENTEE BALLOT APPLICATION SIGNATURE]	123 Main St
UTER MAILING ENVELOPE: II	PECIAL REQUIREMENT FOR SOME FIRST TIME VOTERS: I am a newly registered voter of this county and this is the first time I	Residential Address of Absentee
	m voting in this county (and I did not include my Arkansas driver's cense number or the last 4 digits of my social security number on my	Little Rock, AR 72
(See instructions for ID requirements) d	oter registration application, nor did I provide a qualifying document escribed here when I registered to vote), I am enclosing a copy of a	City, State, and Zip Code tsmith@xyzmail.co
"Ballot Only Envelope" Containing your st	urrent and valid photo identification card or a current utility bill, bank iatement, government check, paycheck, or other government document aix shows my name and address. [Does not apply if you have voted in	Email Address of Absentee Vote
Overseas / Military Voters refer to Note on the your voter instructions regarding residency	is Arkansas county before or are an overseas / military voter.]	YOU MAY RETURN THIS #
	Rev. August 2023	1.50 MAT KLYOK (1115)
	1011100012020	

FION 4: PLEASE SELECT HOW YOU WISH TO	D RECEIVE YOUR BALLOT:	FOR OFFICE USE ONLY
<ul> <li>I will pick up my ballot from the office of the</li> </ul>		DATE:
<ul> <li>Email (<u>Only</u> available for UOCAVA voters).</li> <li>Email address;</li> </ul>		REGISTRANT ID:
Mail. Please send my ballot to the following	address:	PRECINCT:
123 Main St		
Little Rock, AR 72201		
Picked up via Designated Bearer, Administrat	tor, or Authorized Agent:	
Printed Name of Bearer/Administrator/Agent	Signature of Bear	rer/Administrator/Agent
Note: A designated bearer may obtain or deliver a within the 15 days before a school election, special a runoff election. A bearer, administrator, or author must sign the register, under oath, when picking up	l election, preferential primary election orized agent must provide a current a	n, or general election OR the 7 days before
I, the applicant, received assistance in filling out t	this Application for Absentee Ballot.	
If <u>YES</u> , the person giving assistance must comple	ete the information below:	1 Giving Assistance
	ete the information below:	Giving Assistance
If <u>YES</u> , the person giving assistance must comple	ete the information below:	Giving Assistance
If <u>YES</u> , the person giving assistance must comple Printed Name of Person Giving Assistance Residential Address of Person Giving Assistance ION 6: PLEASE COMPLETE ALL INFORMATI	ete the information below: - Signature of Person KON BELOW AND <u>SIGN THE AP</u>	PLICATION:
If <u>VES</u> , the person giving assistance must comple Printed Name of Person Giving Assistance Residential Address of Person Giving Assistance ION 6: PLEASE COMPLETE ALL INFORMATI formation I have provided is true to the best of my kn and subject to a fine of up to the thousand dollars (3)	ete the information below: 	PLICATION: 1 have provided false information, 1 may be guilty
If <u>VES</u> , the person giving assistance must complete Printed Name of Person Giving Assistance Residential Address of Person Giving Assistance ION 6: PLEASE COMPLETE ALL INFORMATI formation I have provided is true to the best of my kn and subject to a fine of up to ten thousand dollars (1) of of perjury that I am registered to vote, and that I am	ete the information below: 	PLICATION: 1 have provided false information, 1 may be guilty
If <u>VES</u> , the person giving assistance must complete printed Name of Person Giving Assistance Residential Address of Person Giving Assistance Residential Address of Person Giving Assistance Residential Address of Person Giving Assistance ION 6: PLEASE COMPLETE ALL INFORMATI formation I have provided is true to the best of my kn and subject to a fine of up to ter thousand dollars ( <i>V</i> ) of of perjury that I am registered to vote, and that I am rri Smith	ete the information below: 	PLICATION: I have provided false information, I may be guilty (10) years, or both, under federal law. I certify under
If <u>YES</u> , the person giving assistance must complete printed Name of Person Giving Assistance Residential Address of Person Giving Assistance (Residential Address of Person (Resi	ete the information below: 	PLICATION: 1 have provided false information, 1 may be guilty (10) years, or both, under federal law. I certify under Voter
If <u>YES</u> , the person giving assistance must comple Printed Name of Person Giving Assistance Residential Address of Person Giving Assistance ION 6: PLEASE COMPLETE ALL INFORMATI formation I have provided is true to the best of my kn y and subject to a fine of up to ten thousand dollars (SI y of perjury that I am registered to vote, and that I am rri Smith d Name of Absentee Voter B Main St	tet the information below: Signature of Person NON BELOW AND <u>SIGN THE AP</u> novledge under penalty of perjury. If 10,0000 or imprisonment for up to ten the person who is registered to vote. <u>11/3/2002</u> Date of Birth of Absentee	PLICATION: 1 have provided false information, I may be guilty (10) years, or both, under federal law. I certify under Voter
If <u>YES</u> , the person giving assistance must complete printed Name of Person Giving Assistance	ION BELOW AND <u>SIGN THE AP</u> ION DECEMBENT OF A DECEMBENT IN THE APPLICATION OF A DECEMBENT IN THE	PLICATION: 1 have provided false information, I may be guilty (10) years, or both, under federal law. I certify under Voter
If <u>YES</u> , the person giving assistance must complete the printed Name of Person Giving Assistance Residential Address of Person Giving Assistance <b>ION 6: PLEASE COMPLETE ALL INFORMATI</b> formation I have provided is true to the best of my kn and subject to a fine of up to ten thousand dollars (SI yo of perjury that I am registered to vote, and that I am <b>rri Smith</b> d Name of Absentee Voter <b>B</b> Main St ential Address of Absentee Voter	ter the information below: Signature of Person NON BELOW AND <u>SIGN THE AP</u> novledge under penalty of perjury. If 10,0000 or imprisonment for up to ten the person who is registered to vote. <u>11/3/2002</u> Date of Birth of Absentee <u>501-340-85000</u> Phone Number of Absent	PLICATION: I have provided false information, I may be guilty (10) years, or both, under federal law. I certify und Voter ee Voter

APPLICATION TO YOUR LOCAL COUNTY CLERK VIA MAIL, FAX, EMAIL OR HAND DELIVERY

# EARLY VOTING

### 10 days before Election Day

### **13 Early voting sites**

Monday – Friday; 8 am – 6 pm Saturday - 10 am – 4 pm



#### Early Voting 1 Pulaski County Regional Bldg 501 West Markham Little Rock, AR 72201

#### Center 1001 W. 16th St Little Rock, AR 72202

#### Early Voting 4 Thompson Library 38 Rahling Circle

Little Rock, AR 72223-9187

Early Voting 7

Center

Jess Odom Community

1100 Edgewood Drive Maumelle, AR 72113-6279 William F Larr Library 2801 Orange : N Little Rock

#### Early Voting 5

Early Voting 2

Dunbar Community

William F Laman Public Library 2801 Orange Street N Little Rock, AR 72114-2200

Early Voting 3 Dee Brown Library

6325 Baseline Rd

Early Voting 6

Community Center

Jacksonville, AR 72076

5 Municipal Drive

Jacksonville

Little Rock, AR 72209-4729

#### Early Voting 9

McMath Library 2100 John Barrow Road Little Rock, AR 72204-1439

### Early Voting 10

Hillary Clinton Childrens Library 4800 W. 10th St. Little Rock

#### Early Voting 11

Early Voting 8

2803 E. Kiehl Ave.

Sherwood

First Christian Church of

Sherwood, AR 72120-3162

John Gould Fletcher Library 823 N. Buchanan St. Little Rock

#### Early Voting 12

Terry Library 2015 Napa Valley Dr Little Rock

Early Voting 13

Shorter College 604 North Locust St. North Little Rock





# ELECTION DAY VOTING

132 Precincts91 total locationsPolls open from 7:30 am until7:30 pm





### WHAT IS A PROVISIONAL BALLOT?

- Fail-safe mechanism for voters who arrive at the polls on Election Day and whose eligibility to vote is uncertain
- Help America Act (HAVA) requires the states to offer provisional ballots for voters whose names were not on the voter list







# COMMON REASONS TO VOTE BY PROVISIONAL BALLOT

- Name is not on the poll or registration list
- Eligibility cannot be otherwise established
- Identity and/or eligibility to vote has been challenged by a poll watcher or election official
- Does not have identification as required
- Requested an absentee ballot but either didn't receive it or didn't cast it and attempts to vote in person





## PROVISIONAL BALLOTS ARE COUNTED *officially*

- Voter submits proof of identity to the county clerk or the county board no later than noon the first Monday following the election
- Voter did cast the correct ballot for the precinct of the voter's residence
- Voter did cast the correct absentee ballot for the precinct of the voter's residence



# Election Misinformation

FAKE

EW

FAKE

FAKE

NFWS

SHAR



# Election Misinformation

Source: the free internet project.org

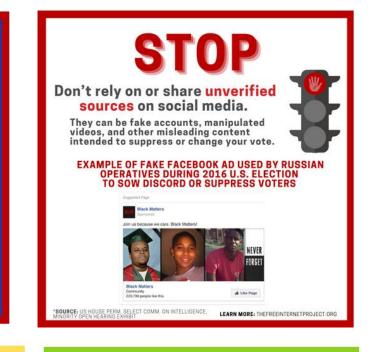
# WHAT IS ELECTION MISINFORMATION?

Election misinformation is false, deceptive, or inaccurate information related to the election.

#### It can be:

- Fake news
- Fake accounts on social media
- Fake election results
- Other misleading content intended to suppress or change your vote or to discredit the election process





### CAUTION THE FBI WARNS DON'T FALL FOR FAKE NEWS OF VOTING PROBLEMS

"The increased use of mail-in ballots due to COVID-19 protocols could leave officials with incomplete results on election night."

"Foreign actors and cybercriminals could exploit the time required to certify and announce elections' results by disseminating disinformation that includes reports of voter suppression, cyberattacks targeting election infrastructure, voter or ballot fraud, and other problems intended to convince the public of the elections' illegitimacy."



"SOURCE: FBI & CISA, HTTPS://WWW.IC3.GOV/MEDIA/2020/200922.ASPX

LEARN MORE: THEFREEINTERNETPROJECT.ORG

A PUBLIC SERVICE ANNOUNCEMENT BY THE FREE INTERNET PROJECT



- Rely on multiple trusted sources
- Share only sources you know are reliable
- Report election misinformation to social media companies

#### These safe practices protect everyone on social media.



LEARN MORE: THEFREEINTERNETPROJECT.ORG







STAY CONNECTED WITH THE CLERK'S OFFICE

