APPENDIX 1

REC 1

ELECTORAL COMMISSION

APPLICATION FOR REGISTRATION AS A VOTER

(Regulation 2(1))

I hereby apply to be registered as a voter:

ID Number

Country of Birth

Date of Birth

day month 1 9 year DB

Surname

Names

Physical Address
(place of ordinary residence)

Postal Code PO

Postal Address (if different from the above)

Postal Code PA

I confirm that the information contained herein is correct.

Signature, Mark or Left Thumb Print

ENGLISH

OFFICIAL USE ONLY

For use with fingerprint only

Which finger's print was taken

Signiture of official

Paste barcode or hand written receipt here

Voting District

Date application submitted

day month 1 9 year

Certificate for voter registration

Enumerator Area