REC 1

Independent Electoral Commission

APPLICATION FOR REGISTRATION AS A VOTER

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

This form is available in all official languages on request.

ENGLISH

OFFICIAL USE ONLY

Temporary Registration Card

Enumerator Area

For use with fingerprint only

Which finger's print was taken?

Signature of official

Paste barcode or handwritten receipt here

Voting District

Registration Date — day — month — 9 — year