## **CONTACT INFORMATION** Work: Home: Home : \_\_\_\_\_\_ Other: Elections Act (2021 Revision) **FORM C** (rule 3(1)) APPLICATION TO BE TREATED AS AN ABSENT ELECTOR **VOTING AT A MOBILE STATION** Name in full Mr./Mrs./Miss\_\_\_\_ Street address Electoral district for which registered as an elector Reasons for application\_\_\_\_\_

Street address to be attended by mobile station

## **Declaration By Applicant**

I,	, of
	clare that the information contained in the above form is correct to
the best of my knowledge and	l belief.
Signature of applicant	
Signature of witness	
Full name of witness	
Date	, 20
Declar	ation By Person Who Assists An Applicant
(To be completed by a person	n who has assisted the applicant to complete the form or who has
signed the form on behalf of t	the applicant, or both, where the applicant was not able, because of
physical or other disability, to	complete or sign the form.)
I,	, of
do solemnly and sincerely de	eclare that I assisted the applicant by filling out and/or signing the
above form in the presence of	f the applicant and on behalf of the applicant, and that in doing so I
did not influence the appli	icant in any way but accurately recorded therein the wishes,
information and reasons state	d by the applicant, and that the information contained in the above
form is correct to the best of r	ny knowledge and belief.
Signature of person making d	eclaration
Signature of witness	
Full name of witness	
Date	20