

Application to vote by post

Only one person can apply using this form.
If more forms are needed, please contact the Elections Office on (0191) 553 1141.
Complete **every** section and sign the form personally. Please use **BLACK INK**.

1. About You

Surname

First names (in full)

Your address (where you are registered to vote)

Postcode

2. How long do you want a postal vote?

I want to vote by post (tick one box)

until further notice

for election(s) held on date

for the period from date to date

3. At which elections do you want a postal vote?

Parliamentary or Assembly elections

Local elections

All elections

4. Address for Ballot Paper

Please send my ballot paper to (tick one box)

my address where I am registered to vote (see Part 1 above)

the following address

Reason for sending ballot paper(s) to an alternative address:

Postcode

5. Your signature

Write your date of birth

eg. if your date of birth is 10th June 1970 write

D D

M M

Y Y Y Y

Sign

Sign within the white area with your usual signature

Each person has to fill in and sign their own form.
It is an offence to make a false statement on this form – maximum fine £5,000.

You do not have to give the following information below, but it will help us to contact you if there is a query about your form.

Today's date

Daytime Tel No

Please return to: Elections Office, Sunderland City Council, Civic Centre, Sunderland SR2 7DN (Helpline (0191) 553 1141)