Bolton Application for Proxy to vote

Applications must be received no later than 5pm 11 working days before an

Council	by post	ciccion
Your Address:		Please give your contact telephone numbers: Home:
National Insurance Number (you can find this on your payslip, P60 or on letters about tax, pensions or benefits)		
This application will enable you to vote by post at <u>all</u> forthcoming elections. If you would like a postal proxy vote for a specific election only, please specify the date of the election:		
Details of the elector who you are a proxy for Name		
Please indicate if any of the conditions below apply, as you may not be required to provide a signature if you: a) Have a disability that prevents you from signing		
Please ensure that you have completed each section of this form correctly and then return it to: THE ELECTIONS OFFICE 2nd Floor Howell Croft North BOLTON BL1 1QY		If you have any questions regarding this form, please contact the Electoral Registration Office on: 01204 333843 / 331248 / 338784 / 338785 / 331247
Your Date of Birth: Please enter your date of birth in the boxes below in a DD MM YYYY format, writing clearly within the borders of the boxes, using a black pen. Your Signature: Please sign your normal signature within the box below, without crossing the shaded grey area, using a black pen. Today's Date:/		