



## **HOUSE OF REPRESENTATIVES GENERAL ELECTION - 2006 APPLICATION FOR POSTAL BALLOT PAPER**

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Please read these notes carefully before filling in this form

1. Postal ballot papers may be issued to voters –
  - (a) whose real place of living is more than 20 kilometres from the polling station at which they are registered; or who are residing overseas; or
  - (b) who because of serious illness or infirmity or religious reasons cannot vote in person on polling day; or
  - (c) who are under sentence of imprisonment; or
  - (d) who satisfy the Returning Officer that for any good reason they will not be able to vote in person at any polling station which is taking votes for both the constituencies in which the voter is registered.
2. Applicants who claim they cannot vote in person due to ill-health or infirmity must submit a certificate to this effect signed by a registered medical practitioner, a registered medical assistant or a registered nurse.
3. Applicants who are in prison must submit a certificate to this effect by the officer-in-charge of the prison concerned.
4. By law a postal ballot does not have to be sent to an applicant unless his or her application will reach the Returning officer at least 7 clear days before polling is due to commence at the polling stations at which he or she is registered to vote.
5. Only applicants who sign in English script may, by law, have a postal ballot paper sent to them by mail. If you sign this application in Hindi or Chinese script or by means of a thumbprint, you will not have postal ballot papers sent to you by mail, but will instead be sent a notice requesting you to attend before a specified person at a specified time and place.

**FORM 14B**

**To the Returning Officer (Divisional Commissioner) \_\_\_\_\_ Division**

Full Name

First Name(s)

Last Name

Serial Number (if known)

Date of Birth

Residential Address

Flat and House number

Street or Village or Place

Locality (suburb of town or city, or tikina)

City or Town

Postal Address (to which Postal Ballot Paper should be sent)

Name of constituencies in which you have registered to vote (if known)

Communal Constituency

Open Constituency

Reasons for application for a Postal Ballot Paper (see note 1. on Form 14A attached)

tick one box -

(a)

☐

(b)

☐

(c)

☐

(d)

☐

if you ticked box (d), please give your reason for being unable to vote at any polling station taking your votes:

Signature (in English script - see note 5. on Form 14A attached)

Date

**Return this Form, along with copies of any necessary certificates (see notes 2. and 3. on Form 14A attached) to the office of the Returning Officer at your Divisional Offices.**