

Application Form to Vote by Proxy for a Particular Election/Referendum

Please complete in **BLACK INK** and either scan and email to voting@wiltshire.gov.uk OR return to Electoral Services Wiltshire Council, County Hall, Bythesea Road, Trowbridge, Wiltshire BA14 8JN. Need help? Phone 0300 456 0112. Please provide an email or telephone number in case of query.

Address where you are registered to vote

Who do you want to vote on your behalf?

Name (in full)

Address

Relationship to you (if any)

About you

First name(s) (in full)

Surname

Title (Mr, Mrs, Ms, Miss, Dr, Other)

Proxy vote for which election/referendum?

For election(s)/referendum on

<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Day		Month		Year	

Your Date of Birth

<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Day		Month		Year	

Reason for this application

Your Declaration

As far as I know, the details on this form are true and accurate. I have asked the person named above who is willing and able to vote for me as my proxy

Signature: (must be signed by the elector only) Keep within the border and use **BLACK INK**.

I cannot supply a signature because of:

- disability
- inability to write

Date:

Tel No/Email:

Have you had help completing this form?

Name and Address of helper