

Please read the notes provided before completing this form. If you need help completing the form please contact the **Electoral Services Helpline** on **(0113) 2476726**. Please complete using **BLACK INK** and **BLOCK CAPITALS**.

1 About you

Surname

First names (in full)

Your address

Daytime telephone number (optional)

Email address (optional)

2 How long do you want a postal proxy vote for?

I want to vote by postal proxy: (tick one box only)

- Until Further notice
- For the election(s) to be held on: (enter date)

d	d	m	m	y	y	y	y

- For the period from: (enter date)

d	d	m	m	y	y	y	y

To: (enter date)

d	d	m	m	y	y	y	y

3 At which election(s) do you want a postal proxy vote?

Please tick the appropriate box:

- All elections
- Parliamentary elections
- Local elections

4 About the elector (who you are acting as proxy for)

Surname

First names (in full)

Electors address

5 Address to which the postal vote should be sent (if different to Part 1)

Address

I cannot reasonably be expected to vote in person at the electors allotted polling station because:

6 Your signature and date of birth

Please write your date of birth in DD MM YYYY format in the black boxes below. For example if your date of birth is 1st December 1975 you would enter 01 12 1975.

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Please sign once in the box below using **BLACK** ink. **IMPORTANT** – Keep your signature within the grey border

Date of signing

d	d	m	m	y	y	y	y

Legal & Democratic Services, Electoral Services Section,
Level 2, Town Hall, The Headrow, Leeds LS1 3AD