

GENERAL ELECTION 2023

Emergency application to vote by Proxy at Election on 12th October 2023

Please write in BLACK INK and use BLOCK CAPITALS. Please read the notes before completing this form.

1 Your name	
First names in full:	
Surname:	
Date of Birth:	

2 Address where you are registered to vote	3 Your Declaration
	As far as I know, the details on this form are true and accurate. I have asked the person named below who is willing and able to vote for me as proxy.
	Signature <div></div> Date:

4 Reason for application	
Please give details of your physical incapacity or the circumstances which prevent you from voting in person:	
Please give the date and time this happened:	

5 Proxy declaration			
I am capable and willing to be appointed to vote as the applicant's proxy.			
Proxy's signature:		Date:	

6 Proxy Details	
Please complete your proxy's details as fully as possible.	
Name:	
Address:	
Family Relationship (if any)	

⑦ Support for this application by medical practitioner / employer	
To be completed by the Supporter as fully as possible. Please state if self-employed.	
Name of Support:	
Address of Support:	
Qualification of support:	
Date of elector's Incapacity/circumstance Preventing voting:	

⑧ Supporter's declaration – Please delete as appropriate	
<ul style="list-style-type: none"> • I am properly qualified to support this application. • I am treating the applicant for the physical incapacity, or the person is receiving care from me in respect of the physical incapacity. • The person cannot reasonably be expected to go in person to the allotted polling station or to vote unaided there by reason of that incapacity. • The information is true to the best of my knowledge and belief and the person's physical incapacity occurred on the date I entered in section 4. • I am the employer of the person. • I am self-employed. 	
Supporter's Signature:	
Date:	

⑨ Please return this form to:
<p align="center">Returning Officer for Gibraltar, The Gibraltar Parliament, 156 Main Street, Gibraltar</p> <p align="center">Helpline: (+350) 20078420; Email: proxyvoting2023@parliament.gi</p>

Notes

This application must only be used if you became physically incapacitated or will be absent in relation to occupation, employment or service, and are applying not later than 5pm on Thursday 17th October 2019.

- Section 1 Your first name(s) and surname.
- Section 1 Your date of birth – if not completed, an absent vote cannot be granted.
- Section 2 Your address on the Register of Electors.
- Section 3 You must sign and date this section otherwise your application will be rejected.
- Section 4 Give the details of your physical incapacity or the circumstances which prevent you from voting in person.
- Section 5 Your proxy may sign this section but the proxy application can be allowed without.
- Section 6 Name and address of your appointed proxy, along with your family relationship to your proxy, if applicable.
- Section 7 To be completed by:
- a registered medical practitioner. If you are in a residential home or sheltered housing, the matron, home care director or warden may support your application. For occupation, service or employment reasons by your employer (or delegated employee); if self-employed by someone who knows but is not related to you.
 - The employer of the person. In the case of self-employed, this should be stated.
- Section 8 Your supporter must sign and date this section otherwise the application will be rejected.
- Your Proxy must be eligible to vote in the General Election.
 - A person may not act as proxy for more than two electors.