Form No. 3

Sections 10(2) and 19(1)

Notice of Claim

To the Supervisor of Elections
TAKE NOTICE that I,
(Name of Claimant)
of
(Place of Residence)
(Occupation)
am qualified for inclusion in the [provisional] [preliminary]* list of voters for the
electoral district and that my
(a) name has been [omitted from] [wrongly stated in]* the list
(b) address has been [omitted from] [wrongly stated in]* the list
(c) occupation has been [omitted from] [wrongly stated in]* the list or has been changed
and that I hereby claim that such list be amended as follows:
,
Dated this, 20, 20
Signature of Claimant
Signature of Claimant

^{*}Strike out bracketed word(s) not applicable