

FORM 4
[see rule 53(2)]

LIST OF BLIND AND INFIRM VOTERS

Election to President from Municipal Committee/Council
 Or election to member from Ward/Constituency Number
 of Municipal Committee/Council

No. of Polling Station/place of poll _____

Serial number of elector on the roll	Full name of elector	Full name of companion	Address of companion	Signature of companion
1	2	3	4	5

Date: _____

Signature of Presiding Officer