

## **SUPPLEMENTARY DATA**

(Persons with disabilities/Senior Citizens with disabilities)

Applicant's Signature or Customary Marking/Thumb mark over printed name    CERTIFICATION/ATTESTATION BY ASSISTANCE NEEDED ON VOTING PERIOD		DEPSONAL IN	IEOPMATION	
FIRST NAME: MIDDLE NAME: POST: COUNTRY:  TYPE OF DISABILITY Physical Hard of Hearing/Deaf Speech Visual Non-Manifest Multiple Disabilities  TYPE(S) OF ASSISTANCE NEEDED ON VOTING PERIOD Assistor Communication Assistance Visual Assistance None  CERTIFICATION/ATTESTATION BY ASSISTOR (Persons with disabilities/Senior Citizens with disabilities)  1. That I assisted the herein applicant for registration: 2. That filled dut his application in accordance with the information given to me; 3. That the applicant was placed under oath; 4. That the Administering Officer/Interviewer read to the applicant his accomplished application; and 5. That the applicant firmed the truth of the information stated in the accomplished application for registration by affixing his thumb mark and/or customary mark on his application in the presence of the Administering Officer/Interviewer.  IN WITNESS WHEREOF, I have hereunto affixed my signature this	_	PERSONALIN	FORWATION	
TYPE OF DISABILITY  Physical	LAST NAME:			
MIDDLE NAME: POST: COUNTRY:  PWD  TYPE OF DISABILITY  Physical	FIRST NAME:			
POST: COUNTRY:  TYPE OF DISABILITY  Physical	_			
TYPE OF DISABILITY    Physical				
TYPE OF DISABILITY  Physical	POST:			
TYPE OF DISABILITY    Physical	COUNTRY:			
Assistor   Communication Assistance   Visual		P	PWD	
Assistor   Communication Assistance   Visual	TYPE OF DISABILITY		TYPE(S) OF ASSISTANCE NEEDED ON VOTING PERIO	חם
Assistor   Communication Assistance   Visual A			THE (5) OF ASSISTANCE NEEDED ON VOTING FEMALE	
Speech  Visual  Non-Manifest  Multiple Disabilities    Applicant's Signature or Customary Marking/Thumb mark over printed name   Date:	-		Assistor	
Visual			Communication Assistance	
Applicant's Signature or Customary Marking/Thumb mark over printed name  Date:			Visual Assistance	
Applicant's Signature or Customary Marking/Thumb mark over printed name    Date:	Non-Manifest		None	
CERTIFICATION/ATTESTATION BY ASSISTOR  (Persons with disabilities/Senior Citizens with disabilities)  I,	Multiple Disabilities			
CERTIFICATION/ATTESTATION BY ASSISTOR  (Persons with disabilities/Senior Citizens with disabilities)  I,				
(Persons with disabilities/Senior Citizens with disabilities)  I,		king/Thumb mark over printed na		
That the Administering Officer/Interviewer read to the applicant his accomplished application; and  That the applicant affirmed the truth of the information stated in the accomplished application for registration by affixing his thumb mark and/or customary mark on his application in the presence of the Administering Officer/Interviewer.  IN WITNESS WHEREOF, I have hereunto affixed my signature this	appear below, hereby bind myse  1. That I assisted the h  2. That I filled out his a	ons with disabilities/Some with disabilities/Some elf and declare declare under erein applicant for registration in accordance with	enior Citizens with disabilities), a resident of, whose name and signature r oath: ion:	
registration by affixing his thumb mark and/or customary mark on his application in the presence of the Administering Officer/Interviewer.  IN WITNESS WHEREOF, I have hereunto affixed my signature this	4. That the Administer	ing Officer/Interviewer read		
Administering Officer/Interviewer.  IN WITNESS WHEREOF, I have hereunto affixed my signature thisday of, 20				
IN WITNESS WHEREOF, I have hereunto affixed my signature thisday of, 20,  Signature over printed name of Assistor  Assistor's Left Thumb mark  Assistor's Right Thumb mark			r customary mark on his application in the presence of the	:
Assistor's Left Thumb mark  Assistor's Right Thumb mark			signature thisday of, 20	
Assistor's Left Thumb mark  Assistor's Right Thumb mark				
Assistor's Left Thumb mark  Assistor's Right Thumb mark				
Assistor's Left Thumb mark  Assistor's Right Thumb mark				
Assistor's Left Thumb mark  Assistor's Right Thumb mark	Ciamatura ayar m			
	Signature over p	ninted Hame Of Assistor		
SUBSCRIBED AND SWORN to before me thisday ofatat				
	SUBSCRIBED AND SWORN	to before me this	day ofat	