FORM 4 NOTICE FOR HEARING OF CLAIMS AND OBJECTIONS

[Rule 17(1)] (To be filled in by the claimant)

То
Name of the claimant
Son/Wife/Daughter of
Full address of the claimant
(To be filled in by the office of the Electoral Registration Officer)
Reference
Claim No of
Son/wife/daughter of
resident of
for inclusion of his/her name in the electoral for
ward. Take notice that the claim will be heard at
(place) at
You are directed to be present at the hearing with such evidence as you may like to
adduce.
Place
Date

Electoral Registration Officer