PROFESSION/

OCCUPATION

BELIZE CITY COUNCIL

(REGISTRATION OF ELECTORS AND ELECTIONS) REGULATIONS, CAP. 85 Form No. 12

FORM OF NOMINATION PAPER

We, the undersigned being registered electors for the Belize City Council do hereby nominate the following person as a proper person to serve as an elected member for the Belize City Council.

ABODE

Voter Registration Number

OTHER NAMES

SURNAME

Voter Registration Number

I assent to the above Nom	nation				
(S	igned by the Pers	on assenting	g the Nomination)		
	Voter Re	egistration Nเ	ımber		
(Print name of Registered Elector)			(Signature of Registe	ered Elector)	
Voter Registration Number			Voter Registration Number		
(Print name of Registered Elector)			(Signature of Registe	ered Elector)	

^{*}Please write voters registration number for registered electors and person assenting the nomination in the space provided.

ATTACHMENT TO NOMINATION FORM

Information as requested to be printed on ballot paper

Political Party/Independent _	(Clearly write full name of party/inde	pendent)	(Abbreviation)		
SURNAME	OTHER NAMES (INCLUDE AKA ETC.)	ADDRESS	DATE OF BIRTH (DD/MM/YYYY)	OFFICE SOUGHT	COLOUR

^{*} Please type or print all information in full BLOCK LETTERS