



**COUNCIL ELECTION 2015-2019**

# APPLICATION FORM

**FOR POLLING AGENTS  
FOR COUNCIL ELECTION 2015-2019**

POLLING CENTRE: \_\_\_\_\_

NAME: \_\_\_\_\_ Fellowship No. \_\_\_\_\_  
*(Polling Agent)*

Address for Correspondence: \_\_\_\_\_

CNIC No. \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_ Cell # \_\_\_\_\_

Candidates for Council being represented, along with his / her signature:

S No.	Name/s of Candidate/s	Ballot Paper No/s.	Signature of Candidate/s
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\_\_\_\_\_  
Signature of Polling Agent