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Province:

Name and Surname of Candidate:

Name of Political Party/Coalition:

Particulars to be corrected (tick the corresponding box):

Name and Surname of Candidate: .....

Symbol/Logo.....

Photo of Candidate.....

Other: \_\_\_\_\_

\_\_\_\_\_

Attach copy of receipt-check list (CN-06)

Signature of Candidate: \_\_\_\_\_

Signature of Candidate Nomination Officer: \_\_\_\_\_ Date: \_\_\_\_/\_\_\_\_/\_\_\_\_  
dd/mm/yy