



National Gazette

PUBLISHED BY AUTHORITY

(Registered at the General Post Office, Port Moresby, for transmission by post as a Qualified Publication)

No. G72]

PORT MORESBY, MONDAY, 21st MARCH

[2011

Organic Law on National and Local Level Government Elections

NOTICE OF NEW CLAIM FOR ENROLMENT FORM 11

I, Andrew S. Trawen, Electoral Commissioner of Papua New Guinea, by virtue of the powers enabling me under Section 242 of the *Organic Law on National and Local Level Government Elections*, hereby by this instrument amend and approve Form No. 11 of the Regulations, entitled "Claim for Enrolment" to be included in the Regulations in the form as set out hereunder:

CLAIM FOR ENROLMENT FORM

BAR CODE 411878

I apply for: New Enrolment :- Transfer Enrolment :- Provisional Enrolment :-

Personal Particulars

Last Name:

Give Names:

Date of Birth: or Year of Birth: Occupation:

Gender: Male: Female:

Place of Residence

Province: Open Electorate:

LLG: Ward No. and Village Name:

RURAL

URBAN

Clan: Section No. : Lot No. :

Sub Clan: Street :

Village/Rest House/etc: Suburb/Town/Settlement:

.....

Notice of New Claim for Enrolment Form 11— *continued*

Declaration	
1: I am a citizen of Papua New Guinea;	
2: I have resided in the Electorate for 6 months or more;	
3: I am not under the age of 18 years (delete if you are making a provisional enrolment application)	
4: I will reach the age of 18 on 20(do not fill this in if your are not under the age of 18)	
I hereby claim enrolment as an elector of Open Electorate. I declare that all of the statements made in this claim are true to the best of my knowledge and belief.	
Signature or make of claimant:.....	Date:

Witness	
I, the undersigned, am an elector or am qualified to be an elector and certify that I have seen the above claimant sign the above claim, and that I either know the statements made by the claimant to be true or have satisfied myself by asking the claimant or in some other way, that they are true.	
Signature of Witness:	Date:
Occupation:	Address:

Verification	
I, the undersigned, acting as enrolment agent appointed by the Returning Officer for Open Electorate have satisfied myself that the statements made by the Claimant above to be true.	
Name of Enrolment Agent :.....	
Signature :	Date:

Certification	
I, the undersigned, as Returning Officer for Open Electorate certify that best endeavours have been taken to properly identify the above claimant and confirm the personal details provided.	
Dated Received:	Province:
Name of Returning Officer:	Signature:

The use of this form is to take effect from the date of publication of this instrument in the *National Gazette*.

Dated this 2nd day of March, 2011.

A S. TRAWEN, CMG, MBE.,
Electoral Commissioner.