

FORM A

Communication with regard to Authorized Persons to intimate names of the candidates set up by recognized National or State political party or Registered un-recognized political party.

To

1. The Chief Electoral Officer,
.....(State/Union Territory).
2. The Returning Officer for the
.....Constituency.

Subject: General Elections to from (State/Union Territory)
–Allotment of Symbols – Authorization of persons to intimate names of candidates.

Sir,

In pursuance of paragraph 13 (c), (d) and (e) of the Election Symbols (Reservation and Allotment) Order, 1968, I hereby communicate that the following person (s) has/have been authorized by the party, which is National Party/State Party in the State of/Registered Un-recognized Party to intimate the names of the candidates proposed to be set up by the party at the election cited above.

Name of person authorized to send notice	Name of office held in the party	District(s)/area (s) constituency/constituencies in respect of which he has been authorized.
1	2	3
1.		
2.		
3.		
4.		

2. The specimen signatures of the above mentioned person (s) so authorized are given below:

1. Specimen signatures of Shri

(i) (ii).....

(iii)

2. Specimen signatures of Shri

(i) (ii)

(iii)

3. Specimen signatures of Shri

(i) (ii).....

(iii).....

Yours faithfully,

President/Secretary

Name of the Party

Place:

(Seal of the Party)

Date:.....

NB.

1. This must be delivered to the Returning Officer and the Chief Electoral Officer not later than 3 p.m. on the last date for making nominations.
2. Form must be signed in ink by the office bearer (s) mentioned above. No facsimile signature or signature by means of rubber stamp, etc., of any office bearer shall be accepted.
3. No form transmitted by fax shall be accepted.