



Independent National Electoral Commission

EPMC 01

APPLICATION FORM FOR ELECTION OBSERVERS

Date / /	Name of organization:	
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Group Leaders Name:	
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Organization's Address:	
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State	ANAMBRA STATE GOVERNORSHIP ELECTION 2017
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Name of Team Representative	Address
Signature	Phone
	Email

Type of Organisation	International Civ. Society Organisation		Embassy	
	Dom. Civ. Society Organisation		Others	

Attach Evidence of Reg. with INEC CSO	
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Previous Electoral Experience (Attach evidence(s) if any)	Date	Where
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Type of activity covered by Team	
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Official

Remark	
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Approved	
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Not Approved	
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Signature:

National Commissioner / Director

STAMP