<u>DÁIL ELECTION 2024</u> <u>CONSTITUENCY OF LIMERICK COUNTY</u>

1	
Of	
(address)	
being a candidate in this ele	ection, or
ELECTION AGENT for _	
	(Name of Candidate)
	llowing person as Personation Agent at the location Day the 29 th November 2024:
Name:	
Address:	
Polling Station Number:	
Name of Polling Station:	
Booth Number:	
	1
Dated:	
Signed:	
PRINT NAME:	
Contact Number:	

FAILURE TO RETURN THIS FORM IN TIME WILL RESULT IN REJECTION OF APPOINTMENT

Signature of Returning Officer: