

**(S25)**

**ELECTORAL FORM IX**  
**FORM FOR CANCELLATION OF POSTAL VOTE OR CHANGE OF FALKLAND ISLANDS ADDRESS FOR POSTAL**  
**BALLOT PAPERS**

TO: The Registration Officer Constituency.

I \_\_\_\_\_ of \_\_\_\_\_  
(full name) (address)

Hereby \* give notice of cancellation of my postal vote

\*notify you that my address in the Falkland Islands to which postal ballot papers are to be sent has changed and that my new address is:

Signed \_\_\_\_\_ Witness \_\_\_\_\_

Dated

**Note: This notice must be signed and dated by the postal voter, whose signature must be witnessed by an elector or a justice of the peace.**