

FORM XXII - A

APPLICATION FOR ISSUE OF POSTAL BALLOT PAPER

(for PWD voters, Voters 80 and above years of age, voters found COVID-19 positive)

Election to the Office of Member of the Greater Hyderabad Municipal Corporation of
from Ward

To

The Returning Officer,
..... Ward, GHMC

Sir,

I am a Senior citizen having age of _____ years / found COVID-19 positive
intend to cast my vote by post at the ensuing election to the office of Ward Member
from ward No. _____ in Greater Hyderabad Municipal Corporation.

Relevant proof is enclosed herewith.

My name is entered at Serial Number in polling Station No.
..... of Ward electoral Roll.

The ballot paper may be sent to me at the following address.
(This shall be same as in the document enclosed)

Place :

Yours faithfully,

Date :

Signature

Name:

Postal Address :

* Senior citizen shall enclose self attested aadhar / EPIC Card / SSC Certificate
(Any one of the above)

* In case of COVID-19 Positive cases, they have to enclose medical test certificate in
addition to above.