

وكالة للتصويت
VOTING PROXY

I.

(The principal)

I, the undersigned.....

First name:.....

Maiden name.....

Last name.....

Profession:.....

Date and place of birth:.....

Residing at:.....

Registered on the electoral list of:.....

Poll place:.....

Give power of attorney to vote in my behalf to:

II.

(The representative)

First name:.....

Maiden name.....

Last name.....

Profession:.....

Residing at:.....

Date and place of birth:.....

Registered on the electoral list of:.....

Poll place:.....

Done at

Signature of the principal:

Notary public Seal:

Algerian Official Authority: