

## Scrutineer Appointment Form

## **Please use BLOCK LETTERS**

To t	he officer in cha	rge:					
at							
	(Polling P	Place/Scrutiny Centre)					
I here	eby appoint						
(Surname		or family name) (given names)					
of							
(Residential address)							
to act		our Polling Place/Scrutiny Centro	e for the ACT Legislati	ve Asse	mbly election	for which I am	а
Signature of candidate					/	/	
Name	e of candidate						
		(as it appears on the ballo	t paper)				
Name applic	e of Registered Party (if cable)						
		Undertaking	by Scrutineer				
I und	ertake:						
(1)	not to unlawfully communicate any information about the vote of an elector acquired by me in the performance of my duties under the <i>Electoral Act 1992</i> in a way that is likely to enable the identification of that elector;						
(2)	not to interfere with or attempt to influence the vote of any elector;						
(3)	not to communicate with any person in the polling place except so far as is necessary in the discharge of my duties; and						
(4)	not to undermine the health and safety measures as advised by the ACT Electoral Commission regarding social distancing and hygiene measures to minimise the spread of COVID-19.						
Signa	ture of scrutineer				/	/	