DO NOT SEND ANY PAYMENT AS THIS NOTICE IS NOT A FINE.

PLEASE PRINT WHEN FILLING IN THE FOLLOWING FORM

SECTION 1	**Name of Elector**	**Daytime Phone**
	Current Address	**Date of Birth**

	Please complete EITHER Section 2A OR 2B
SECTION 2A	**I DID VOTE (***Tick appropriate box)* ☐ at the polling place at ..... ☐ by post ☐ pre poll (i.e. voted at an early voting centre) in person at ..... *(Our records will be re-checked against your claim.)*
2B	**OR THE REASON FOR NOT VOTING** .... *(Attach a separate sheet if you need more space)*

SECTION 3A	**I declare that the information provided above is true to the best of my knowledge.**
	Signature of elector OR person completing the Notice .....
3B	**Name and address of any person acting on behalf of the elector** **Name** ..... **Address** .....

WITNESS SECTION

SECTION 4	**The declaration was signed in my presence.** ..... **Full name** **Signature of Witness**	**Address of Witness** .... **Date** ...../...../.....

- More options on how to return the Notice are on our website https://ecsa.sa.gov.au/voting/failure-to-vote
- Emailing completed form to ECSA.NonVoters@sa.gov.au