**FORM – M-12**

 **[See Rule 56A-11(1)]**

Form of declaration by companion of blind or infirm voter

Election to the…………………………………………………………………… (Name of Society) Co-operative Society Ltd……………………………………………………………… Tahsil……………………………. District ………………………………..

From the ………………………………………………………. constituency. (Name of constituency)

No. and name of Polling Station:

I ................................................................... aged ............................ residing at. .................................; ............................. Hereby declare that:-

1. I wish to act as companion of Shri/Smt ............................ who is a blind /infirm voter at the above election and whose name is in the voters list at Sr. No......................................................
2. I have not already acted as the companion of any other voter at my polling station on this day.
3. I will keep secret the vote recorded by me on behalf of the voter aforesaid.

Place:

Date: Signature of the companion