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SCHEDULE 1

FORMS FOR LOCAL GOVERNMENT FINANCE ACT REFERENDUMS

Form of Certificate of Employment

Certificate of Employment
Referendum on the Council Tax increase for [insert name of authority]
Voting area of [insert name of voting area]
Date of referendum (day) [date] (month) [year]
The person named below is entitled to vote at any polling station in the above voting area on production and surrender of this certificate to the Presiding Officer
I certify that _____ (name of voter) who is numbered* _____ in the register of electors for the voting area named above, cannot reasonably be expected to go in person to the polling station allotted to them at this referendum by reason of his/her employment on the above date for a purpose connected with this referendum: – as a constable** – as a Police Community Support Officer** – by me (Only applies to Counting Officer's staff)**
Signature _____ Counting Officer/Police Officer (Inspector or above)**
Date _____
* The voter's number can be found on the poll card which was sent to them shortly after the referendum was announced, or can be checked by contacting the Electoral Registration Officer. ** Person completing the form to delete whichever does not apply.

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Declaration for the companion of a voter with disabilities	
Referendum on the Council Tax increase for <i>[insert name of authority]</i>	
Date of referendum <i>[day] [date] [month] [year]</i>	
A voter with disabilities is a voter who has made a declaration that he or she is so incapacitated by his or her blindness or other disability, or by his or her inability to read, as to be unable to vote at this referendum without assistance. In this form, "voter" means the person casting the vote at the referendum and includes a person voting as a proxy.	
Part 1 To be completed by the voter's companion	
Companion's name	
Companion's address	
Voter's name	
<i>[Only for use if the disabled voter is acting as a proxy]</i> Voter is acting as proxy for:	
Elector's number <i>[If the disabled voter is acting as a proxy, this is the number of the person for whom the voter is acting]</i>	
I have been requested to assist the voter named above to record their vote at this referendum. I declare that:	
<p>(1)</p> <ul style="list-style-type: none"> • I am entitled to vote as a voter at this referendum <p>or</p> <ul style="list-style-type: none"> • I am the *spouse/*civil partner/*parent/*brother/*sister/*child of the voter with disabilities and am 18 years of age or over <p style="text-align: center;"><i>*Please delete whichever does not apply</i></p>	
AND	
<p>(2)</p> <ul style="list-style-type: none"> • I have not previously assisted more than one voter with disabilities at this referendum. <p>If I have assisted one other voter their name and address is:</p>	
<i>[Complete if appropriate]</i> Name and address of other person assisted	

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NOTE – It is a criminal offence to knowingly make a false statement in this form.			
Companion's signature		Date	
Part 2 To be completed by the Presiding Officer			
I, the undersigned, being the Presiding Officer for:			
Polling station		Voting area of	
Hereby certify that the above declaration was signed in my presence.		Presiding Officer signature	
Date		Time (exact)	