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**FORMULIER P2**

# VERKLARING OP EREWOORD OM BIJ VOLMACHT TE KUNNEN STEMMEN

(Nieuw Brussels Gemeentelijk Kieswetboek, artikel 59, § 1, 3° en 7°)

|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
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| Ik, ondergetekende | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Naam | |  | | | | | | | | | | | | | Voornaam | | | |  | | | | | | | | | | | | | | | | |
| Rijksregisternummer | |  |  | . | | |  | |  | | . | |  | |  | | - | | |  | | |  | | |  | | | . | |  | |  | | |
| Straat | |  | | | | | | | | | | | | | | | | | | | | Huisnummer | | | | |  | | | | | | | | |
| Postcode | |  | | | Gemeente | | | |  | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Geboortedatum (*DD/MM/JJJJ*) | |  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| verklaar op mijn erewoord dat ik mij in de onmogelijkheid bevind om mij aan te bieden bij het stembureau op | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| op zondag l\_\_l\_\_l . l\_\_l\_\_l 20l\_\_l\_\_l | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| wegens (Vink het overeenkomstig vakje aan en vul in) : | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| een activiteit als zelfstandige, | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | ☐ |
| met ondernemingsnummer (KBO) | | | | | |  | |  | |  | | | |  | | . | |  | | |  | | |  | . | | |  | |  | |  | |  |
| een tijdelijk verblijf in het buitenland, | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | ☐ |
| namelijk in | \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ (land), | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| om andere dan beroeps- of dienstredenen. Ik kan geen bewijsstukken voorleggen omdat | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  (*geef hier kort de reden voor de onmogelijkheid weer*). | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| III. Ondertekening | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Gedaan te: | | | | | | | | | | | | Op : (*datum – DD/MM/JJJJ*) | | | | | | | | | | | | | | | | | | | | | | | |
| Handtekening | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |