

(Local Governments Act, Cap 243) [as amended]

NOMINATION PAPER FOR MUNICIPALITY ELECTIONS

(FILL IN TRIPLICATE)

MALE COUNCILLOR REPRESENTING PEOPLE WITH DISABILITIES (PWDS)

We, the undersigned registered voters in the	Electoral Area of	
hereby propose the under mentioned person as a candidate for election as a Male PWD Councillor		
for Electoral Are	a in Municipality in	
Distri	ct and we certify that to the best of our knowledge and	
belief she is qualified to be elected as such.		
Particulars of Candidate:		
Candidate's Surname in full		
Other Names		
Address/Telephone No.		
Occupation/Profession		
Voter No. or National ID No. or Application ID No.		
Age		
Sex		
Address for Service of Process and Papers		

Particulars of Persons Making Nomination:

	Name	Place of Residence and Address	Voter No. or National ID No. or Application ID No.	Signature
Proposer				
Seconder				

FORM EC4

Section 119 (4)(a)



(Local Governments Act, Cap 243) [as amended]

No.	Names of Persons Supporting Nomination of Candidate	Village(s)	Voter No. or National ID No. or Application ID No.	Occupation	Signature
1.					
2.					
3.					
4.					
5.					
6.					
7.					
8.					
9.					
10.					



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APPOINTMENT OF OFFICIAL AGENT OF CANDIDATE

(To be filled in by Candidate)

I,	candidate for	, appoint:
Names (Surname first)		of
Voter No. or National ID No. or Application ID	No	,
Address		
Occupation		
to be my official agent for my election as Male	PWD Councillor for	
Electoral Area in	Municipality in	
District.		
Signature	Date:	
		FORM EC6 Section 119(4) (c)
ACCEPTANCE	E OF APPOINTMENT	
(To be filled	d in by Official Agent)	
I	C	of the above names, Voter
No. or National ID No. or Application ID No., a	address and occupation, do co	nsent to my appointment
as official agent of the candidate named in thi	s Nomination Paper.	
Signature of Official Agent	Date:	



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OATH AUTHENTICATING STATEMENT

I, solemnly swear in the name of the
Almighty God / solemnly affirm that the statement in this Nomination Paper of my name, age, address, occupation,
address for service of process and papers and the name and address of my appointed agent are correct to the
best of my knowledge and belief.
Date:
Before me
before the
Name: Date:
SPONSORSHIP OF CANDIDATE BY POLITICAL PARTIES/ORGANISATION OR INDEPENDENT [Section 119A of The Local Governments Act, (Cap 243)] (as amended)
I am sponsored for nomination by
(state name of political party / organization sponsoring, or candidate if independent)
whose address is
(state address of political party or organization sponsoring, or candidate if independent)
Signature
Certified by Political Party/Organisation or Candidate if Independent:
Name of Certifying Officer :
Designation:
Signature:



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STATEMENT UNDER OATH BY PERSON TO BE NOMINATED AS A **MUNICIPALITY COUNCILLOR**

I	, do solemnly and sincerely state that:
	I am a citizen of Uganda. I am not below the age of eighteen years.
3. 3	I am registered as a voter in Electoral
1	Area, District with Voter No. or National ID No. or Application ID
4.]	No
((i)
((ii)
((iii)
((iv)
((v)
6.	I do not owe allegiance to any country other than Uganda.
8. I	I am not under sentence of death or other sentence of imprisonment without the option of a fine, imposed on me by any competent court. I have not been adjudged or otherwise declared- (i) Bankrupt under any law in force in Uganda from which I have not been discharged; nor (ii) To be of unsound mind, under any laws in force in Uganda
9.	I am not disqualified -
	(i) by reason of my holding or acting in any office the functions of which involve a responsibility for or in connection with the conduct of an election;(ii) For any other reason under the Local Government Act, (Cap 243) as amended or any other law in force in Uganda.
	Date:
	Signature
	Before me
Namo	Signature:
ivaille.	[A Commissioner for Oaths or Magistrate, Registrar of High Court (including Deputy and District Registrar) or other person authorised by law to administer oaths.]



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CONSENT TO NOMINATION AS A CANDIDATE

I do consent to my nomination as candidate for	, Electoral
Area in	Municipality in
District,	and I make this solemn statement knowing and
believing it to be true.	
Subscribed and solemnly declared by me at	, on this
day of	, 20
Candidate's Signature	Date:
Before me	
Name: Signature: . [A Commissioner for Oaths or Magistrate, Real and District Registrar) or other person as	egistrar of High Court (including Deputy



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DECLARATION OF NOMINATED CANDIDATE

Ι,	being Returning Officer
/Assistant Returning Officer for	Electoral District,
pursuant to the Local Government Act, Cap 24	3 (as amended), declare
	, duly nominated/not duly nominated
as a candidate to contest for election as Muni o	cipality Male Councillor representing PWDs for
	Electoral Area in
District.	
reasons why he/she is not nominated.	eturning Officer/Assistant Returning Officer should state
	lame
Signature & S	tamp
Date:	
Place	
Time	



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GUIDE FOR PAYMENT OF NOMINATION FEES FOR MUNICIPALITY MALE COUNCILLOR REPRESENTING PWDs

1.0 LEGAL REQUIREMENT

Section 119(4)(f)(i), Local Government, 2005 (as amended) provides that the nomination paper shall be accompanied by a nomination fee of two and half currency points, equivalent to Shs. 50,000/= (Fifty thousand shillings only).

2.0 PAYMENT PROCEDURE

Note: Aspiring candidates shall pay nomination fees to the Municipality Council in cash or bank draft and be issued with a General Receipt.

3.0 CONFIRMING PAYMENT OF NOMINATION FEE

- (i) The aspiring candidate shall present the "GENERAL RECEIPT" obtained from the Municipality Council on or before nomination day to the Returning Officer/Assistant Returning Officer.
- (ii) The Returning Officer/Assistant Returning Officer shall verify the payment with Municipality Council.

4.0 PRESENTATION OF THE GENERAL RECEIPT TO THE RETURNING OFFICER/ASSISTANT RETURNING OFFICER

On nomination day the aspiring candidate shall present the GENERAL RECEIPT to the Returning Officer/ Assistant Returning Officer with other nomination documents, confirming payment of the nomination fee.