



Date:.....

**REQUEST FOR COPY OF ELECTRONIC REGISTER**

First Name:.....Last Name:.....

Telephone No:.....

I hereby request for a Manual Register for the following details

District:.....Constituency:.....

**PLEASE MAKE A CHOICE**

Manual:.....Electronic:.....

Email:.....

Signed:.....

Authorized By:.....

**JUSTINE LUMUMBA KASULE (HON)**

**SECRETARY GENERAL**

**CONTACT PERSONS**

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- 4. Aaron - 0775386290