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## APPLICATION to the Central Election Commission

**In the European Parliament elections 2024, I wish to exercise my right to vote in the Republic of Latvia and I provide the following information about myself (\* - mandatory fields):**

NAME (-S) *	SURNAME (-S) *	
PLACE OF BIRTH (country, city)	DATE OF BIRTH (day, month, year) *	SEX (female / male) *
IDENTITY NUMBER * (on the Population Register of the Republic of Latvia)	CITIZENSHIP (- S) *	
E-MAIL ADDRESS	RESIDENCE ADDRESS IN THE REPUBLIC OF LATVIA*	
INFORMATION REGARDING THE PERSONAL IDENTIFICATION DOCUMENT*		
TYPE (passport / ID card): _____		
NUMBER AND SERIES: _____ ISSUING STATE: _____		
ISSUING AUTHORITY: _____		
DATE OF ISSUE _____ TERM OF VALIDITY _____		
I WAS LAST ENTERED ON THE ELECTORAL ROLL OF*		
_____ (EU member state – constituency)		

**I hereby undertake to exercise my right to vote in the European Parliament elections 2024 only in the Republic of Latvia.**

**I hereby agree to the processing of my personal data.**

Date \_\_\_\_\_

Signature \_\_\_\_\_

The data controller: the Central Election Commission of the Republic of Latvia  
Purpose of data processing: person's registration for the European Parliament elections in the Republic of Latvia  
Storage period of the application: a month after the elections

*Please submit the filled in Application Form to the Central Election Commission in of these ways:*

- Signed with safe e-signature to [cvk@cvk.lv](mailto:cvk@cvk.lv);
- Personally (4 Smilšu Street, Riga);
- By post (4 Smilšu Street, Riga, LV-1050).