



[barcode]
ID: [elector ID]

[elector name] [elector address]

Dear [elector salutation] [elector surname]

Notice of possible prosecution — Do not ignore Apparent failure to vote — Third notice [election year] ACT Legislative Assembly election

I wrote to you on [date of initial notice] and again on [date of second notice] to advise that, according to my records, it appears that you did not vote at the ACT Legislative Assembly election held between [election voting period]. To date I have not received a reply from you.

It is an offence under the *Electoral Act 1992* to fail to vote at an ACT election without a valid and sufficient reason.

Please follow the instructions on the back of this notice to resolve this matter, if you:

- **DID VOTE**; or
- **DID NOT VOTE**, but believe you have a valid and sufficient reason for not voting; or
- **DID NOT VOTE**, and wish to pay the \$20 penalty to finalise the matter.

The penalty for failing to vote is \$20 if paid to the ACT Electoral Commission, or a maximum fine of \$80 (plus any court costs) if the matter is dealt with by the Court.

If you do not respond to this notice by [reply date], I may be obliged to have the matter dealt with by the Court.

If the elector to whom this notice is addressed is absent or incapacitated, another person may respond on his or her behalf.

Please note that giving false or misleading information in replying to this notice is a serious offence.

Yours sincerely

[Electoral Commissioner name] Electoral Commissioner

[mailing date]

Elector's reply regarding apparent failure to vote at the [election year] ACT Legislative Assembly election

Your enrolme		[elector name] [elector enrolled addre		Elector ID
Your daytir contact phor	me 📄	-	Your email address:	<u>-</u>
Provide aCompCompform	re paying reason of the paying	ng the \$20 penalty, use on for not voting, or if you the form at www.electi and returning this form in tionsFTV@act.gov.au	u did vote, tel ons.act.gov. n the reply-pa	yment methods listed below, or; Il us where you voted, by: au/failure_to_vote; or aid envelope provided or scanning and emailing this about where you voted or why you did not
1. IF YOU I	DID V	OTE		
Write the name of the polling place and the date and time where you voted for the [election year] ACT Legislative Assembly election:			Polling place Date and tir	
) TE VOLLE	OTO N	OT VOTE and holiove v	ou havo a v	valid and sufficient reason for not voting
	•	e [election year] ACT Leg	islative Assen	our reason is not acceptable. In the second
3. IF YOU I	DID N	OT VOTE and wish to p	oav the pena	alty of \$20
	ı	_	h throug	gh the postal service.
Internet	www	v.elections.act.gov.au	/failure_to_	Visa only) over the internet at _vote ted below. (Do not return this form.)
Phone	Acces	ss Canberra Contact Cent Monday to Friday – 7:00 Saturday – 8:00 am to 5: Sunday – 9:00 am to 5:0	tre on 13 22 8 am to 8:00 pr 00 pm 0 pm. Elector ID" pr	rinted below. (Do not return this form.)

Elections ACT Office Address: Level 6, 221 London Circuit, Canberra City.

Pay by cash or cheque/money order (made out to the "ACT Electoral Commission") or credit or debit card (Mastercard or Visa only), at the office of Elections ACT, Monday to Friday – 9:00 am to 5:00 pm. **Bring this form with you**.

Elector ID: [elector ID] [barcode]

Your payment details will be processed via the internet if paying by credit or debit card.

Note: Payment of the \$20 penalty fully discharges any liability in relation to your apparent failure to vote. No further proceedings can be taken against you and you will not be regarded as having been convicted of an offence. However, if for any reason your cheque is not honoured by your bank, or the credit or debit card details provided are rejected, it will be deemed that payment of the penalty has not been made.