

ANNEX "G"

Republic of the Philippines
COMMISSION ON ELECTIONS

REQUEST FOR REPLACEMENT OF VOTER ID

Reason: ☐ lost ID Card ☐ card face defect ☐ wrong encoding of information

PROVINCE: _____ CITY/MUN: _____ DATE OF REQUEST: _____

NAME AS APPEARING IN THE VRR/ID:

LAST:	FIRST:	MIDDLE:
ADDRESS:		PRECINCT NO.

INFORMATION FOR CORRECTION

LAST:	FIRST:	MIDDLE:
ADDRESS:		PRECINCT NO.
DATE OF BIRTH:	CIVIL STATUS:	CITIZENSHIP:
Wrong Biometrics Data <input type="checkbox"/> photograph <input type="checkbox"/> fingerprint <input type="checkbox"/> digital signature		

Signature over Printed Name
Requesting Party

Signature over Printed Name
Election Officer

O.R. No. _____ Contact No. of the Requesting Party: _____
Issued by: _____
Issued on: _____

ACKNOWLEDGEMENT RECEIPT

DATE: _____

LAST: _____ FIRST: _____ MIDDLE: _____

This is to acknowledge receipt of your request for replacement of Voter ID due to:

☐ lost card ☐ card face defect ☐ wrong encoding of information

Election Officer

**Please be informed that the concerned Election Officer will notify the voter on the status of the replaced Voter ID*