

Office Use only	Date received	Time received	Initials	Number

4	UK Parliamentary (General) Election	Notification of Election Agent
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Constituency name	Harborough, Oadby and Wigston Constituency	Date of election	Thursday, 4 July 2024
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Candidate's notification of their election agent

I, (Candidate name in full):

Hereby declare that the name and address of my election agent is

Agent's name:

Agent's address (in full):

The office address of my election agent to which all claims, notices, legal process and other documents may be sent is:

Agent's office address in full:

Candidate's signature (or of person on behalf of candidate):

Date: __ __ / __ __ / 2 0 2 4

Confirmation of acceptance by election agent

I [agent named above] confirm my acceptance as the election agent for the above named candidate. I understand that I must carry out my duties according to law. I understand there are penalties if I fail to fulfil my duties according to law.

Agent's signature

Date __ __ / __ __ / 2 0 2 4

Agent's other details in case of query (encouraged but optional – will not be published)

Home telephone:

Work telephone:

Mobile telephone:

Email address:

Return to the **(Acting) Returning Officer** by no later than **4pm** on the last day to deliver nominations

Office Use only	Date received	Time received	Initials	Number

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UK Parliamentary (General) Election

Notification of Sub-Agent

Constituency name	Harborough, Oadby and Wigston Constituency	Date of election	Thursday, 4 July 2024
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This form can only be used in a **county constituency**. To find out if the constituency is a borough/burgh or county constituency please contact the (Acting) Returning Officer.

The **election agent** may appoint one or more sub-agents to act within the constituency but each must have a separate area. Sub-agent areas **must not overlap**.

Candidate name:	
Name of election agent:	

Details and extent of sub-agent

Name of sub-agent:	
Sub-agent Address:	
Office address (if different):	
Extent of appointment (describe area):	

Election agent signature

I declare the above named person to be a sub-agent

Signature of election agent:		Date:	___ / ___ / 2024
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Confirmation of acceptance by sub-agent

I understand that I must carry out my duties according to law. I understand there are penalties if I fail to fulfil my duties according to law.

I confirm my acceptance as sub-agent for the above named candidate

Signature of sub-agent:		Date:	___ / ___ / 2024
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Sub-agent's other details in case of query (encouraged but optional – will not be published)

Home telephone:	
Work telephone:	
Mobile telephone:	
Email address:	

Return to the (Acting) Returning Officer by no later than the second day before polling day