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CTORAL COMMISSION
L FROM POLLING UNIT
ELECTION SIN: PED001615
FORM EC 8A

Code 0 1 1

Code 0 3

Code 0 3 NAME/SIGNATURE OF POLLING AGENT Toloss emy nin J.R. R. DRD SCORED IN WO PRIMARY N Second . ON == person. IL APM APC NNPP APP NRM BP PDP SDP PRP Unit

Officer) hereby certify that the information this polling Unit and that the election was