## CITIZEN'S MOVEMENT EXEMPTION DECLARATION

The appearing below	
with date of birth	
ID number / passport	
and home address	
I declare my commute to following reason:	(state the exact time) relates to the
(tick $\sqrt{\ }$ the corresponding box be	elow)
1. Visiting a pharmacy or vi	siting a doctor.
2. Visiting a store to get essential supplies	
3. Visiting a bank, as long a	s an electronic transaction is not possible
4. Visiting people in need to	provide aid
5. Short commute, near my pet's needs	home, for personal physical activity or for
conditions provided by la	g. funeral, marriage, baptism) under the w or commute of a divorced parent or an re communication of parents and children, plicable provisions.
7. Commuting to my hor quarantine.	ne after compulsory self-limitation or
8. Declaration of any other justified under the prohibi	purpose of movement which could be tion measures
Signature:	
Date:	