**Form Β CITIZEN'S MOVEMENT EXEMPTION DECLARATION**

The appearing below ………….…………………….…………….. with date of birth ….………….………………….……………. ID number / passport ……………………………………………… and home address ………………………………………………

I declare my commute to …………… (state the exact time) relates to the following reason:

(tick √ the corresponding box below)

1. Visiting a pharmacy or visiting a doctor.
2. Visiting a store to get essential supplies
3. Visiting a bank, as long as an electronic transaction is not possible
4. Visiting people in need to provide aid
5. Short commute, near my home, for personal physical activity or for pet's needs
6. Going to a ceremony (e.g. funeral, marriage, baptism) under the conditions provided by law or commute of a divorced parent or an estranged parent, to ensure communication of parents and children, in accordance with the applicable provisions.
7. Commuting to my home after compulsory self-limitation or quarantine.
8. Declaration of any other purpose of movement which could be justified under the prohibition measures

………………………………………………………………..……………

Signature: .…………………………………………… Date: ……………………………………………