

COVER PAGE OF THE ANNUAL ARTICLE 7 REPORT

NAME OF STATE [PARTY]: Republic of Macedonia

REPORTING PERIOD: 1 January 2017 to 31 December 2017

<p>Form A: National implementation measures:</p> <table border="1"> <tbody> <tr> <td><input type="checkbox"/></td> <td>changed</td> </tr> <tr> <td><input checked="" type="checkbox"/></td> <td>unchanged (last reporting: 2016)</td> </tr> </tbody> </table>	<input type="checkbox"/>	changed	<input checked="" type="checkbox"/>	unchanged (last reporting: 2016)	<p>Form F: Program of APM destruction:</p> <table border="1"> <tbody> <tr> <td><input type="checkbox"/></td> <td>changed</td> </tr> <tr> <td><input type="checkbox"/></td> <td>unchanged</td> </tr> <tr> <td><input checked="" type="checkbox"/></td> <td>non applicable</td> </tr> </tbody> </table>	<input type="checkbox"/>	changed	<input type="checkbox"/>	unchanged	<input checked="" type="checkbox"/>	non applicable		
<input type="checkbox"/>	changed												
<input checked="" type="checkbox"/>	unchanged (last reporting: 2016)												
<input type="checkbox"/>	changed												
<input type="checkbox"/>	unchanged												
<input checked="" type="checkbox"/>	non applicable												
<p>Form B: Stockpiled anti-personnel mines:</p> <table border="1"> <tbody> <tr> <td><input type="checkbox"/></td> <td>changed</td> </tr> <tr> <td><input type="checkbox"/></td> <td>unchanged</td> </tr> <tr> <td><input checked="" type="checkbox"/></td> <td>non applicable</td> </tr> </tbody> </table>	<input type="checkbox"/>	changed	<input type="checkbox"/>	unchanged	<input checked="" type="checkbox"/>	non applicable	<p>Form G: APM destroyed:</p> <table border="1"> <tbody> <tr> <td><input type="checkbox"/></td> <td>changed</td> </tr> <tr> <td><input type="checkbox"/></td> <td>unchanged</td> </tr> <tr> <td><input checked="" type="checkbox"/></td> <td>non applicable</td> </tr> </tbody> </table>	<input type="checkbox"/>	changed	<input type="checkbox"/>	unchanged	<input checked="" type="checkbox"/>	non applicable
<input type="checkbox"/>	changed												
<input type="checkbox"/>	unchanged												
<input checked="" type="checkbox"/>	non applicable												
<input type="checkbox"/>	changed												
<input type="checkbox"/>	unchanged												
<input checked="" type="checkbox"/>	non applicable												
<p>Form C: Location of mined areas:</p> <table border="1"> <tbody> <tr> <td><input type="checkbox"/></td> <td>changed</td> </tr> <tr> <td><input type="checkbox"/></td> <td>unchanged</td> </tr> <tr> <td><input checked="" type="checkbox"/></td> <td>non applicable</td> </tr> </tbody> </table>	<input type="checkbox"/>	changed	<input type="checkbox"/>	unchanged	<input checked="" type="checkbox"/>	non applicable	<p>Form H: Technical characteristics:</p> <table border="1"> <tbody> <tr> <td><input type="checkbox"/></td> <td>changed</td> </tr> <tr> <td><input type="checkbox"/></td> <td>unchanged</td> </tr> <tr> <td><input checked="" type="checkbox"/></td> <td>non applicable</td> </tr> </tbody> </table>	<input type="checkbox"/>	changed	<input type="checkbox"/>	unchanged	<input checked="" type="checkbox"/>	non applicable
<input type="checkbox"/>	changed												
<input type="checkbox"/>	unchanged												
<input checked="" type="checkbox"/>	non applicable												
<input type="checkbox"/>	changed												
<input type="checkbox"/>	unchanged												
<input checked="" type="checkbox"/>	non applicable												
<p>Form D: APMs retained or transferred:</p> <table border="1"> <tbody> <tr> <td><input type="checkbox"/></td> <td>changed</td> </tr> <tr> <td><input type="checkbox"/></td> <td>unchanged</td> </tr> <tr> <td><input checked="" type="checkbox"/></td> <td>non applicable</td> </tr> </tbody> </table>	<input type="checkbox"/>	changed	<input type="checkbox"/>	unchanged	<input checked="" type="checkbox"/>	non applicable	<p>Form I: Warning measures:</p> <table border="1"> <tbody> <tr> <td><input type="checkbox"/></td> <td>changed</td> </tr> <tr> <td><input type="checkbox"/></td> <td>unchanged</td> </tr> <tr> <td><input checked="" type="checkbox"/></td> <td>non applicable</td> </tr> </tbody> </table>	<input type="checkbox"/>	changed	<input type="checkbox"/>	unchanged	<input checked="" type="checkbox"/>	non applicable
<input type="checkbox"/>	changed												
<input type="checkbox"/>	unchanged												
<input checked="" type="checkbox"/>	non applicable												
<input type="checkbox"/>	changed												
<input type="checkbox"/>	unchanged												
<input checked="" type="checkbox"/>	non applicable												
<p>Form E: Status of conversion programs:</p> <table border="1"> <tbody> <tr> <td><input type="checkbox"/></td> <td>changed</td> </tr> <tr> <td><input type="checkbox"/></td> <td>unchanged</td> </tr> <tr> <td><input checked="" type="checkbox"/></td> <td>non applicable</td> </tr> </tbody> </table>	<input type="checkbox"/>	changed	<input type="checkbox"/>	unchanged	<input checked="" type="checkbox"/>	non applicable	<p>Form J: Other Relevant Matters</p> <table border="1"> <tbody> <tr> <td><input type="checkbox"/></td> <td>changed</td> </tr> <tr> <td><input type="checkbox"/></td> <td>unchanged</td> </tr> <tr> <td><input checked="" type="checkbox"/></td> <td>non applicable</td> </tr> </tbody> </table>	<input type="checkbox"/>	changed	<input type="checkbox"/>	unchanged	<input checked="" type="checkbox"/>	non applicable
<input type="checkbox"/>	changed												
<input type="checkbox"/>	unchanged												
<input checked="" type="checkbox"/>	non applicable												
<input type="checkbox"/>	changed												
<input type="checkbox"/>	unchanged												
<input checked="" type="checkbox"/>	non applicable												