## FORM 10

Designated location identity (where applications have been received)  1. Listnumber@		Constituency (Assembly/Parliamentary) TRIKARIPUR  2. Period of applications (covered in this list)				Revision identity		
						From date <b>01/11/2024</b>		To date <b>01/11/2024</b>
Place of hearing* Serial number\$ of	Date of receipt	Name (in full) of objector	Particulars of name objected at (to)		Reasons in brief for objection	Date of hearing*	Time of hearing*	
application			Parts number	Serial number	Name in full			
1	2	3	4	5	6	7	8 (a)	8 (b)
1	01/11/2024	Soumya T V	146	1148	Soumya T V	Permanently Shifted		
2	01/11/2024	Shiju K	146	884	Shiju K	Permanently Shifted		
3	01/11/2024	K.Prabhakaran	137	14	K.Prabhakaran	Permanently Shifted		
4	01/11/2024	Vilasini	137	16	Vilasini	Permanently Shifted		
5	01/11/2024	Linda Augustine	87	849	Linda Augustine	Permanently Shifted		
f Jammu and Kash For this revision Place, time and da	mir for this designated leate of hearings as fixe	Legislative Assembly a ocation ed by electoral registratined for each revision for	ion officer			on at designated er rule 15(b)	Date of exhibit Registration C under ru	officer's Office

Designated location identity (where applications have been received)	Constituency (Assembly/Parliamentary) TRIKARIPUR	Revision identity		