FORM 9
(Refer rules 15 & 16)
List of Applications for inclusion of name received in Form 6

Designated location identity (where applications have been received) 1. Listnumber@		Constituency (Assembly/Parliamentary): MANKADA 2.Period of receipt of applications (covered in this list)			Revision identity	
					To date 01/11/2024	
					_	
Date of receipt	Name of claimant	Name of Father/Mother/ Husband and (Relationship)#	Place of residence	Date of hearing*	Time of hearing*	
2	3	4	5	6(a)	6(b)	
01/11/2024	MUHAMMED KABEER	RUKHIYA (WIFE)	PELATHODI, PANG CHENDI, KURUVA, PANG CHENDI, 679338, PERINTHALMANNA			
E In case of Union territories having no Legislative Assembly and the State of Jammu and Kashmir © For this revision for this designated location * Place, time and date of hearings as fixed by electoral registration officer \$ Running serial number is to be maintained for each revision for each designated ocation # Give relationship as F-Father, M-Mother, and H-Husband with in brackets i.e. (F), (M), (H)			Date of exhibition at designated location under rule 15(b)	Date of exhibition at Electoral Registration Officer's Office under rule16(b)		
	Date of receipt 2 01/11/2024 es having no Legislative A designated location earings as fixed by electors to be maintained for each	Date of receipt Name of claimant 2 3 01/11/2024 MUHAMMED KABEER es having no Legislative Assembly and the State of s designated location earings as fixed by electoral registration officer to be maintained for each revision for each designated	Date of receipt Name of claimant Pather/Mother/ Husband and (Relationship)# 2 3 4 01/11/2024 MUHAMMED KABEER RUKHIYA (WIFE) st designated location earings as fixed by electoral registration officer to be maintained for each revision for each designated	Date of receipt Name of claimant Place of residence Name of Claimant Rame of Father/Mother/ Husband and (Relationship)# RUKHIYA (WIFE) PELATHODI, PANG CHENDI, KURUVA, PANG CHENDI, KURUVA, PANG CHENDI, 679338, PERINTHALMANNA Res having no Legislative Assembly and the State of sedesignated location earings as fixed by electoral registration officer to be maintained for each revision for each designated	Date of receipt Name of claimant Name of Father/Mother/Husband and (Relationship)# Place of hearing*	