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): UDMA			Revision identity	
		2.Period of receipt of applications (covered in this list)		From date <b>05/11/2024</b>	To date <b>05/11/2024</b>	
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)	
05/11/2024	SAMSUDDEEN	DAVOOD (FTHR)	KUNNIL THAYAL, BEKAL, PALLIKKARA, MAVVAL, 671316, HOSDURG			
05/11/2024	ANJALI K	UMAVATHI B (MTHR)	KUMBALA, PULLUR, PULLUR, PULLUR P O, 671531, HOSDURG			
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 location  # 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 05/11/2024  05/11/2024  ies having no Legislative A serings as fixed by electors to be maintained for each	Date of receipt  Name of claimant  2	Date of receipt  Name of claimant  Pather/Mother/ Husband and (Relationship)#  Note of receipt  Name of claimant  Name of Father/Mother/ Husband and (Relationship)#  Note of receipt  Name of claimant  Name of Father/Mother/ Husband and (Relationship)#  Note of receipt  Name of claimant  Name of Father/Mother/ Husband and (Relationship)#  Note of receipt of applications (cover)  Father/Mother/ Husband and (Relationship)#  Note of receipt of applications (cover)  Name of claimant  Name of Father/Mother/ Husband and (Relationship)#  Note of receipt of applications (cover)  Father/Mother/ Husband and (Relationship)#  Note of receipt of applications (cover)  Father/Mother/ Husband and (Relationship)#  Note of receipt of applications (cover)  Father/Mother/ Husband and (Relationship)#  Note of receipt of applications (cover)  Father/Mother/ Husband and (Relationship)#  Note of receipt of applications (cover)  Father/Mother/ Husband and (Relationship)#  Note of receipt of applications (cover)  Father/Mother/ Husband and (Relationship)#  Note of receipt of applications (cover)  Samsunder of receipt of applications (cover)  Relationship (receipt of applications)  Note of receipt of applications (cover)  Note of rece	Date of receipt  Name of Claimant  Place of residence  Name of Father/Mother/ Husband and (Relationship)#  SAMSUDDEEN  Date of SAMSUDDEEN  Date of Place of residence  Date Of Place of residence  Place of residence  Place of residence  Place of residence  SAMSUDDEEN  DAVOOD (FTHR)  KUNNIL THAYAL, BEKAL, PALLIKKARA, MAVVAL, 671316, HOSDURG  O5/11/2024  ANJALI K  UMAVATHI B (MTHR)  KUMBALA, PULLUR, PULLUR, PULLUR, PULLUR, PULLUR, PO, 671531, HOSDURG  The same properties of the p	Date of receipt  Name of claimant  Place of residence  Name of Father/Mother/ Husband and (Relationship)#  Name of SAMSUDDEEN  DAVOOD (FTHR)  DSHALLIKKARA, MAVVAL, 671316, HOSDURG  O5/11/2024  ANJALI K  UMAVATHI B (MTHR)  ies having no Legislative Assembly and the State of s designated location learings as fixed by electoral registration officer s to be maintained for each revision for each designated  Date of receipt of applications (covered in this list)  From date o5/11/2024  Place of residence  Place of residence  Place of residence  RUNNIL THAYAL, BEKAL, PALLIKKARA, MAVVAL, 671316, HOSDURG  RUMBALA, PULLUR, PU	