

| <b>FORM 10</b><br><i>(Refer rules 15 &amp; 16)</i><br>List of Applications for objection to inclusion of names received in Form 7                                                                                                                                                                                                    |                 |                                                              |                                      |               |                                                            |                                |                                                                               |                              |
|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------------|--------------------------------------------------------------|--------------------------------------|---------------|------------------------------------------------------------|--------------------------------|-------------------------------------------------------------------------------|------------------------------|
| Designated location identity (where applications have been received)                                                                                                                                                                                                                                                                 |                 | Constituency (Assembly/Parliamentary)<br><b>MANANTHAVADY</b> |                                      |               |                                                            | Revision identity              |                                                                               |                              |
| 1. Listnumber@                                                                                                                                                                                                                                                                                                                       |                 | 2. Period of applications (covered in this list)             |                                      |               |                                                            | From date<br><b>23/01/2026</b> |                                                                               | To date<br><b>23/01/2026</b> |
| 3. Place of hearing*                                                                                                                                                                                                                                                                                                                 |                 |                                                              |                                      |               |                                                            |                                |                                                                               |                              |
| Serial number\$ of application                                                                                                                                                                                                                                                                                                       | 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*             |
|                                                                                                                                                                                                                                                                                                                                      |                 |                                                              | Parts number                         | Serial number | Name in full                                               |                                |                                                                               |                              |
| 1                                                                                                                                                                                                                                                                                                                                    | 2               | 3                                                            | 4                                    | 5             | 6                                                          | 7                              | 8 (a)                                                                         | 8 (b)                        |
| 1                                                                                                                                                                                                                                                                                                                                    | 23/01/2026      | Jaya                                                         | 209                                  | 583           | Babu                                                       | Death                          |                                                                               |                              |
| 2                                                                                                                                                                                                                                                                                                                                    | 23/01/2026      | Baby V X                                                     | 209                                  | 452           | Anna                                                       | Death                          |                                                                               |                              |
| 3                                                                                                                                                                                                                                                                                                                                    | 23/01/2026      | Anjana P                                                     | 35                                   | 85            | Anjana P                                                   | Already Enrolled               |                                                                               |                              |
| £ In case of Union territories having no Legislative Assembly and the State of Jammu and Kashmir<br>@ For this revision for this designated location<br>* Place, time and date of hearings as fixed by electoral registration officer<br>\$ Running serial number is to be maintained for each revision for each designated location |                 |                                                              |                                      |               | Date of exhibition at designated location under rule 15(b) |                                | Date of exhibition at Electoral Registration Officer's Office under rule16(b) |                              |
|                                                                                                                                                                                                                                                                                                                                      |                 |                                                              |                                      |               |                                                            |                                |                                                                               |                              |