

**FORM 10**  
*(Refer rules 15 & 16)*  
 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>WEST SHILLONG</b> | Revision identity              |                                      |                                |                                                            |                                                                               |               |              |
|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|---------------------------------------------------------------|--------------------------------|--------------------------------------|--------------------------------|------------------------------------------------------------|-------------------------------------------------------------------------------|---------------|--------------|
| 1. Listnumber@                                                                                                                                                                                                                                                                                                                       | 2. Period of applications (covered in this list)              | From date<br><b>24/08/2026</b> | To date<br><b>24/08/2026</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)        |
|                                                                                                                                                                                                                                                                                                                                      |                                                               |                                |                                      |                                |                                                            |                                                                               |               |              |
| £ 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) |               |              |
|                                                                                                                                                                                                                                                                                                                                      |                                                               |                                |                                      |                                |                                                            |                                                                               |               |              |