

**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)                                                                                                                                                                                                                                                                                                                                                                 |                        | Constituency (Assembly/Parliamentary):<br><b>MAWRYNGKNENG</b> |                                                                       |                                                            | Revision identity                                                             |                              |
| 1. Listnumber@                                                                                                                                                                                                                                                                                                                                                                                                                       |                        | 2.Period of receipt of applications (covered in this list)    |                                                                       |                                                            | From date<br><b>09/08/2026</b>                                                | To date<br><b>09/08/2026</b> |
| 3. Place of hearing *                                                                                                                                                                                                                                                                                                                                                                                                                |                        |                                                               |                                                                       |                                                            |                                                                               |                              |
| <b>Serial number\$<br/>of application</b>                                                                                                                                                                                                                                                                                                                                                                                            | <b>Date of receipt</b> | <b>Name of claimant</b>                                       | <b>Name of<br/>Father/Mother/<br/>Husband and<br/>(Relationship)#</b> | <b>Place of<br/>residence</b>                              | <b>Date of<br/>hearing*</b>                                                   | <b>Time of<br/>hearing*</b>  |
| <b>1</b>                                                                                                                                                                                                                                                                                                                                                                                                                             | <b>2</b>               | <b>3</b>                                                      | <b>4</b>                                                              | <b>5</b>                                                   | <b>6(a)</b>                                                                   | <b>6(b)</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<br># 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) |                              |
|                                                                                                                                                                                                                                                                                                                                                                                                                                      |                        |                                                               |                                                                       |                                                            |                                                                               |                              |