

FORM 16

List of blind and infirm voters

[See rule 59(2)]

Election to the*..... **Gram Panchayat/
Panchayat Samiti/Zilla Parishad/ Mahakuma Parishad from the
..... constituency.

No. and name of polling station.....

Part No. and of serial No. of voter	Full name of voter	Full name of companion	Part No. and serial No. of companion	Signature companion
(1)	(2)	(3)	(4)	(5)

Date.....

.....
Signature of Presiding Officer

- * Appropriate particulars of the election to be inserted here.
** Strike off the inappropriate alternative.