

**FORM 19**  
**LIST OF CHALLENGED VOTES**  
*[See Rule 57(2)(c)]*

Election to the Imphal Municipal Corporation Ward Number .....

Polling Station Number ..... Polling Station Name .....

Sl. No.	Name of the voter	Sl.No. of voter's name in the electoral roll.	Signature or thumb impression of the person challenged.	Address of the person challenged	Name of identifier if any	Name of challenger	Order of Presiding Officer	Signature of challenger on receiving the refund of deposit.
1	2	3	4	5	6	7	8	9

- 1.
- 2.
- 3.
- 4.
- 5.
- 6.

Date : .....

Signature of the Presiding Officer.