



**IMPLEMENTATION NATIONAL ELECTRONIC VOTING
SYSTEM OF BUDGET OF 2019-2020
SCHEMATICALLY**

Sl. No. _____
Name of the Officer _____
Designation _____
Office _____
Date _____

1. Name of the Constituency _____
2. Name of the Candidate _____
3. Name of the Party _____
4. Name of the Polling Station _____
5. Name of the Polling Officer _____
6. Name of the Polling Agent _____
7. Name of the Polling Agent's Representative _____
8. Name of the Polling Agent's Representative's Representative _____
9. Name of the Polling Agent's Representative's Representative's Representative _____
10. Name of the Polling Agent's Representative's Representative's Representative's Representative _____

Sl. No.	Pol. Sta.	Pol. Sta. No.	Pol. Sta. Name	Pol. Sta. Code	Pol. Sta. Type
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REMARKS:

1. The above details are correct.

2. The above details are correct and the same are being submitted for the purpose of the above mentioned work.

Officer in Charge

