



INDEPENDENT NATIONAL MEDICAL LABORATORY

STATEMENT OF FORM OF POLLING FOLLOWED UP

DATE OF POLLING: 15/05/2018

DATE OF POLLING: 15/05/2018
 TIME OF POLLING: 10:00 AM
 NAME OF THE POLLING STATION: 15/05/2018
 NAME OF THE POLLING STATION: 15/05/2018
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 7. NAME OF THE POLLING STATION: 15/05/2018
 8. NAME OF THE POLLING STATION: 15/05/2018
 9. NAME OF THE POLLING STATION: 15/05/2018
 10. NAME OF THE POLLING STATION: 15/05/2018

SL. NO.	NAME OF THE POLLING STATION	STATEMENT OF FORM OF POLLING FOLLOWED UP		NAME OF THE POLLING STATION
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1	15/05/2018			
2	15/05/2018	15/05/2018	15/05/2018	
3	15/05/2018			
4	15/05/2018	15/05/2018	15/05/2018	15/05/2018
5	15/05/2018			
6	15/05/2018			
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