FORM 9
List of Applications for inclusion received in Form 6

1. List number®			2. Period of applications (covered in this list)		From date	To date
Place of h	earing*					
Serial number of application	Date of receipt	Name of claimant	Name of Father / Mother / Husband and (Relationship)"	Place of residence	Date hearin	
1	8/11/21	LALLOWNPUII	VANCALSAWMA ROYTE	Verameur		
2	"	VANINNAWIA	LOLNUANSANGA:	"		
3	"	H. ROSANGLURI	4. NGURTHANSANGA	1		
4	14	CAREY LALRINFELA	K. DENG CHHAWNA	"		
5	+	LACHUNTUANGA SAICO	LALNUNPULA SALCO	"		
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