

REMARKS OF VT TEAM (SPEAKING ORDER CAN ALSO BE RECORDED HERE, WHEREVER REQUIRED):

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***Carry blank sheets to record statement by witness, if required.**

Signature of VT Member 1/ALRCR/LRCR

Signature of VT Member 2

Date

Date

REMARKS OF CIRCLE REGISTRAR OF CITIZEN REGISTRATION (CRCR) :

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Signature of CRCR :

Date :

REMARKS OF DISTRICT REGISTRAR OF CITIZEN REGISTRATION (DRCR) :

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Signature of DRCR :

Date :