

ANNEXURE 54 FORM 17C

[See rules 49S and 56C (2)]

PART I – ACCOUNT OF VOTES RECORDED

Election to House of the People/Legislative Assembly of the State/Union Territory
from.....constituency.

Number and Name of Polling Station:

Identification Number of voting Machine used at the Polling Station:

Control Unit.....

Ballot Unit.....

VVPAT

1. Total number of electors assigned to the Polling Station
2. Total number of voters as entered in the Register for Voters (Form 17A)
3. Number of voters deciding not to record votes under rule 49-O
4. Number of voters not allowed to vote under rule 49M
5. Test votes recorded under rule 49MA (d) required to be deducted-
 - (a) total number of test votes to be deducted:

Total No.	Sl. No.(s) of elector (s) in Form 17A	
.....
 - (b) Candidate(s) for whom test vote(s) cast:

Sl. No.	Name of candidate	No. of votes
.....
6. Total number of votes recorded as per voting machine.....
7. Whether the total number of votes as shown against item 6 tallies with the total number of votes as shown against item 2 minus numbers of voters deciding not to record votes as against item 3 minus number of voters as against item 4(i.e. 2-3-4) or any discrepancy noticed.....
8. Number of voters to whom tendered Ballot papers were issued under rule 49P.....
9. Number of tendered Ballot papers:

	From	Sl. No. Total Tow
(a) received for use	
(b) issued to electors	
(c) not used and returned	

10. Account of papers seals

Signature of polling agents

- | | | |
|----------------------------------|-------------------|----------|
| 1. Paper seals supplied for use: | Total No..... | 1..... |
| | Sl. No. from..... | To |
| 2. Paper seals used: | Total No..... | 2..... |

Sl. No. from..... To

3. Unused paper seals returned to

Returning Officer: Total No.....

3..... Sl. No. from..... To.....

4. Damaged paper seal, if any: Total No..... 4.....

Sl. No. from..... To

5.....

6.....

Date.....

Place.....

Signature of Presiding Officer

Polling Station No.....

PART II- RESULT OF COUNTING

Sl. No. of candidate	Name of candidate	Number of votes as displayed on Control Unit	Number of test votes to be deducted as per item 5 of Part I	Number of valid votes.
1	2	3	4	5
1.				
2.				
3.				
4.				
5.				
N.	NOTA			
Total				

Whether the total number of votes shown above tallies with the total number of votes shown against item 6 of Part I or any discrepancy noticed between the two totals (YES/NO).

Place.....

Date.....

Signature of Counting Supervisor

Name of candidate/election agent/counting agentFull signature

1.

2.

3.

4.

5.

6.

7.

Place.....

Date.....

Signature of Returning Officer