FORM III
(See Rule 4)

<ol> <li>Name of the member (in block letters)</li> </ol>	:					
2. Father's / Husband's Name	:					
3. Permanent Address	:					
4. Thiruvananthapuram Address	:					
5. Date of election / nomination	:					
6. Party affiliation as on—						
(i) Date of election / nomination	:					
(ii) Date of signing this form	:					
	DECLARA	ATION				
I,the information given above is true and co	orrect.	·······		hereby	declare that	
In the event of any change in the immediately.		n above, I ı	ındertake t	o intimate th	he Speaker	
Date:		Signature/Thumb impression of member.				