

Model Application Format for
Obtaining Information Under RTI Act/2005

Place - Karimganj

Date - 02/08/23

To

The State Public Information Officer Asstt. Public
Information Officer
(Name of the Office with Address)

The,

Deputy General

C/O - Office of the Deputy General.

From :-

Full name of the applicant :-

Postal address of applicant :-

Contract Phone No. if any :-

Timit Baran Das (Advocate)
Dist. Advocates' Bar, Karimganj, 788710
6003995993

Sub :-

Information under RTI Act/2005

Sir/Madam,

The undersigned hereby require the following particulars of information.

i)

Subject matter :-

ii)

The Period for which the information
Relates.

iii)

Description :- (i) Whether Rabintra Kr. Deb Senior Attendant was an employee of
your office retired from service? If yes, please furnish the details about,
on which date he was retired.

(ii) Information required about the monthly pension amount of Rabintra Kr. Deb.
(iii) Please furnish the information about, how much sum as retirement benefits
received by Rabintra Kr. Deb in total..

Further it is submitted that the information is required by Post (Ordinary/Register or Speed)

Or

Will be collect in person upon information.

Encl :- Rs.10/- in the form of DD, Banker Cheque /Cash.

Or

Photocopy of BPL, Ration Card in case of BPL Applicant (Application fees is exempted)

Signature/Thumb
Of



02/08/23
TIMIT BARAN DAS
Enrollment No. 155 of 2004
Dist. Advocates' Bar, Karimganj
Email: tbd1978@gmail.com
Mob No. 6003995993

Contd... P/2.

177 : PESM : 11th / 08 / 2023

दश टिका दश टिका दस रुपिया कडु रमळळ १०० ०१ १००० ०१ दहा रुपये दश टिका दस रुपिये दश रुप्यकाणि



भारतीय पोस्टल आर्डर INDIAN POSTAL ORDER

डाक महानिदेशक DIRECTOR GENERAL OF POSTS.

PAY TO _____ को

दस रुपए की रकम THE SUM OF RUPEES TEN ONLY

₹ 10

AT THE POST OFFICE AT _____



सत्यमेव जयते

कमीशन COMMISSION रुपया 1 RUPEE

प्रेषक अपना नाम और पता यहाँ लिख दे।
SENDER MAY FILL IN HIS NAME AND ADDRESS HERE

डाक टिकट
POSTAGE STAMPS

पोस्ट मास्टर POSTMASTER

के डाकघर में अदा करें।

इस लाइन के नीचे मत लिखिए DO NOT WRITE BELOW THIS LINE

55F 986914

पञ्जाब प्रान्त
१०००००००

पूरी रकम वसूल पायी
RECEIVED the full amount

पानेवाले के हस्ताक्षर PAYEE'S SIGNATURE

भारतीय डाकघर नियमावली के नियमों एवं शर्तों के अनुसार जारी
ISSUED SUBJECT TO THE RULES AND CONDITIONS IN THE IPO RULES.

वैधता- जारी करने के महिने के अंतिम दिन से 24 महिने और द्वितीय कमिशन के भुगतान जारी करने के महिने की अंतिम दिन से 36 महिने।
Validity- 24 months from the last day of the month of issue and 36 months from the last date of the month of issue on payment of second commission.

प्र.मु.है. / S.P.P.HYD