

FORM 'D'

Form of Memorandum of Appeal to first/ Departmental Appellate Authority under Section 19 (I) of the Act.

From : Liana
H.No. 27/ Hunthar
Aizawl, Mizoram.

Before

The First Appellate Authority

1. Full name of the Appellant : Liana
2. Address with contact No. : H.No. 27/Hunthar, Aizawl,
Mizoram - 796009
Ph. No. 0389 2340464
9436155109 (M)
3. Particulars of Public Information : Mr. _____, SPIO
Officer.
4. Date of receipt of the order : 11.11.2006
appeal against.
5. Last date for filling the appeal : 10.12.2006.
6. Particulars of information. : List of MNF Returnees.
 - a) Nature and subject matter : Names of all heads of the
of the information required. Family of MNF Returnees.
 - b) Names of the office or Deptt. : Directorate of DM & R
to which the information Mizoram, Aizawl.
relates.
7. the grounds for appeal (details : Lesser No. of heads of
If any, to be enclosed in separate family than expected.
Sheet)

Verification

I Liana s/o Ruala hereby declare that the particulars furnished in the appeal are to the best of my knowledge and belief, true and correct and that I have not suppressed any material fact.

Signature of the appellant,

Place : Aizawl.

Date : 09.12.2006.

To

Mr. P.C. Lalthlamuana,
Director & First Appellate Authority
Dte. of Disaster Management & Rehabilitation
Mizoram, Aizawl.