

BEFORE
 THE DEPARTMENTAL APPELLATE AUTHORITY,
 (OFFICE OF THE
 DEPARTMENT).

(THROUGH THE STATE ASSISTANT PUBLIC INFORMATION OFFICER)

SUBJECT : **MEMORANDUM OF FIRST APPEAL**

(a)	The name and full postal address of the applicant, with phone no., if any	:	
(b)	The full particulars of the SPIO against whose decision the appeal is filed.	:	
(c)	The name and full postal address of the third party, if any, involved in the case	:	
(d)	The claim which the appellant made and the ground(s) on which the claim of the appellant was denied.	:	
(e)	The ground(s) on which the appellant files the appeal	:	
(f)	Relief sought by the appellant	:	

Place

Date

.....

(Signature of the appellant)