

FORM - A
Form of application for seeking information

I.D. No.....
(For official use)

To

The Central Public Information Officer,
Tobacco Board,
(Min.of Commerce, Govt.of India),
Head Office,
GUNTUR - 522 004 (A.P.)

1. Name of the Applicant:

2. Address:

3. Information Sought * :

(Details should include specific points for each information sought)

4. To the best of my knowledge the information sought does not fall within the restrictions contained in Section 8 and 9 of the Act and it pertains to your office.

5. This is certify that ISon/
Daughter/Wife of am a citizen of India.

6. A fee of Rs..... has been deposited vide No
Dated.....

Place :

Date :

Signature of the Applicant
e-mail address, if any :

Tel.No. (Office).....

(Residence).....

Postal Address.....

Note: (i) Reasonable assistance can be provided by the Central Public Information Officer in filling up the Form A.

(ii) Please ensure that the Form A is complete in all respect and there is no ambiguity in providing the details of information required.

(iii) * Brief title of the information sought should not exceed one line.