



**For Office use only**

Amount received	Receipt No.	Date.....
Rs.....	No.....	Cashier's Signature

Checked, Verified and Issued provisional (Certificate No.....)

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**Postal Address of the candidate (To be filled by the candidate)**

Mr./ Ms. \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

POST OFFICE ..... STATE .....PIN CODE.....

TEL.....MOBILE .....