CO/Comp. Apptt/III

S.No.	S.No. of Annex. CO/Comp. Appt/II	I A S INCISE VII	Name & designation of ex-employee	Date of death and Date of Birth of ex- employee	Name and relationship of applicant	Date of Birth of the applicant	Educational Qualification of the applicant	Total RMP secured by the applicant	Recommendations alongwith cadre (MTS/Postman/Mailguard/PA/ SA/MTS Trainee)	Grounds for referring the case to Directorate, if any
		3						Act by		

Signature with full name and designation of all members of Committee on each page

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