

FORM - A

Section 6(1) and 7(1) of the R.T.I. Act, 2005

To,

The Information Officer/The Director,
All India Institute of Speech and Hearing,
Manasa Gangothri,
Mysuru.

1. Full Name of the Applicant	M.S.Naveen Kumar, Advocate
2. Address Mobile Number	# 2, LIG, KHB, HUDCO, 2 nd Stage, Udayagiri, Mysore-19. Contact No.9035040875.
3. Details of the Document/Inspection/Sample required	Please furnish the copy of the order issued to the Agency to provide security service along with tender Notification for the year 2016-17.
4. Year of which the above relates	2016-17
5. Designation and Address of the public information officer from whom the information is required.	The Information Officer/The Director, All India Institute of Speech and Hearing, Manasa Gangothri, Mysuru.

Postal order receipt No. 40F 005446 dated 13-02-2017

Place : Mysuru
Date : 17-07-2017

M.S.Naveen
Signature of the Applicant

CP10
17-7-17

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ಇಲಾಖೆ, ಹೆಚ್. ಸಿ. 2
All India Institute of Speech and Hearing
Manasa-gangothri, MYSORE-570108
R.No. 10892 P. Date 18/7/17

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