

FORM-D
See Rule – 7(1)

Form of Memorandum of Appeal to the First Appellate Authority u/s 19(1) of the Act

From

(Applicant's Name & address)

Before

The First Appellate Authority

1. Full name of the Appellant
2. Address

3. Particulars of Public Information Officer
4. Date of receipt of the order appealed against
5. Last date for filing the appeal
6. Particulars of information:
 - (a) Nature and subject matter of the information required
 - (b) Name of the office or department to which the information relates
7. The grounds for appeal
(Details if any to be enclosed in separate sheet)

Verification

I, _____ Name of the appellant, son of / daughter of / wife of _____ hereby declare that the particulars furnished in the appeal are to the best of my knowledge and belief, true and correct and that I have not suppressed any material fact.

Signature of the Appellant

Place:

Date:

To

Name and address of Appellate Authority