## FORM No. 3IB

## Form of Appeal Memorandum to the Deputy Commissioner

## See Rules 34B and 37C

1. Name and address of appellant	
2. Authority passing the order in dispute	
3. Date of communication of the order appealed against	
4. Address to which notice may be sent to the appellant	
5. Relief claimed	
6. Authorised representative if any	
7. Grounds of appeal	
	(Sd/-)
VERIFICATION	
I/Wethe applicant(s	s) do hereby declare
that what is stated above is true to the best of my/our knowledge and belief.	
Verified today theday of	

**Note:--** The appeal shall be accompanied by the original or a certified copy of the order appealed against.