

**FORM S**

[See Rule 19]

**FORM OF APPEAL.**

To  
(The Appellate Authority)

The ..... day of ..... 19 .....

1. Name of the appellant (s).
2. Authority passing the order in dispute.
3. Date of communication of the order against which the appeal is filed.
4. Address to which notice may be sent to the appellant.
5. Relief claimed.
6. Grounds of appeal.
7. Details of fee remitted.

Signature of Appellants

**VERIFICATION**

I/We ..... the appellant (s) do hereby declare that what is stated above is true to the best of my/our knowledge and belief.

Verified today the .....

day of ..... 19 .....

Signature of Appellants

Signature of Authorised Representative if any.

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