FORM – D
[See Rule – 7 (1)]
Form of Memorandum of Appeal to the first Appellate Authority under Section 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