CERTIFICATE FOR AADHAAR ENROLMENT/ UPDATE

Instructions: Al	details to	be filled in	Block Letters
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(To be valid for 3 months from date of issue)

To be printed on plain A4 paper size;

Not required to print on letter head;

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Contact Number: 722	- 786	27:	77	2					paragraphic control of
I hereby certify above mentioned details of	the resident				Checklis	t for Certifi	er		
and I am a (Tick appropriate box below) Gazetted Officer - Group A		No overv						e Certifier's de	
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Gazetted Officer - Group B					Milw	U			
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Note: This format is applicable for POH documents	nd of Institution			Nati	onal A	ug, VAD	福 380	8000	