

FORM - II A (Rule - 5)

(Annexure to G.O.Ms.No.5, Sheduled Castes Development (POA.A2)
Department, Dated 08.08.2014.

APPLICATION FORM FOR ISSUE OF COMMUNITY AND DATE OF BIRTH CERTIFICATE RELATED TO SHEDULED CASTES/ BACKWARD CLASSES UNDER SECTION 3 (1) OF ACT 16 PF 1993.

(Information to be furnished by the applicant himself supported by the documentary Evidence)

The Mandal Revenue Officer,	
Revenue Divisonal Officer,	
Sub-Collector, Asst. Collector	
District.	
Sir,	Olean Community and Data of Birth
l am in need of a Scheduled Caste/ Backward Certificate for me/ for my Son/ Daughter for which	
1. Name of the Applicant in full (Block Letters)	: KORE MADHULATHA
2. Sex of the Applicant	F
3. Father's Name/ Husband Name	KORE ANJAIAH
4. Mother's Name	ATTINENI RADHA
5. Present Address	: 47-19/24, Rogarendlancen
3. Fresent Address	Noengm.
6. Date of Birth	: 08-06-1984
7. If the applicant has been issued a Community	
Certificate in the past by any authority, a copy	
of School records may be furnished	
8. Caste (including sub-caste) of th Applicant	MUNNURU Kapo
9. Caste (including sub-caste) of th Father	: Munulu Kapo
10 Caste (including sub-caste) of th Mother	MUMPU KAPU
	HINDU
11. Religious professed by the Applicant12. Religious professed by the Father13. Religious professed by the Mother	HINDY
	Want.
14. Aadhar Number of Applicant 786253	00 208 2 000000000000000000000000000000
15. Mobile Number	: 9177637726
DECLARATIO	N

I / We declare that the information furnished by me/us in the application is true and Correct, and the documents appended thereto are genuine and the contents of the Documents are true and correct and that if these are found to be untrue and incorrect, I/We Will be liable for prosecution for furnishing false and incorrect information documents under Section 10 of the Act No.16 of 1993.

Station.

To.

Signature of the Applicant.





భారత ప్రభుత్వం Unique Identification Authority of India

Government of India

నమోదు సంఖ్య / Enrollment No. : 1079/02101/02986

To Kore Madhulatha รี้ อั้้ ฉั้นต้อง WO: Kore Anjaiah H No 4-7-19/24 Raghavendra Nagar Near CHANDAMMA Hospital Nacharam Uppal Le. nacharam K v. Rannaraddi Le.nacharam,K.v. Rangareddy Andhra Pradesh - 500076 9848995112



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మీ ఆధార్ సంఖ్య / Your Aadhaar No. :

7862 5700 5682

ఆధార్ – సామాన్యుని హక్కు



Government of India



కోరే మధులత Kore Madhulatha

වාසුන මයි/DOB: 14/06/1984 \$ / Female

7862 5700 5682



ఆధార్ – సామాన్యుని హక్కు









TSGGDG 6595500

GOVERNMENT OF TELANGANA REVENUE DEPARTMENT FORM III A



Community Serial No: 20

80

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District Code : 06 Mandal Code : 04 Village Code : 008 Application No



CND022429628046 Date: 02/03/2024

COMMUNITY AND DATE OF BIRTH CERTIFICATE

1.This is to certify that the Sri/Srimathi/Kumari <u>ATTINENI NARAYANA</u> S/o / D/o / M/o / F/o / W/o / H/o / C/o Sri. <u>ATTINENI VENKATI</u> of <u>Lachakkapet</u> village / Town of <u>Sarangapur</u> Mandal of <u>JAGITHYAL</u> District of the Telangana State belongs to <u>Munnurukapu-20(BCD)</u> Community which is recognized as B.C under:

The Constitutuion (Scheduled Castes) Order, 1950

The Constitutuion (Scheduled Tribes) Order, 1950

G.O.Ms.No.1793,Education,dated 25-9-1970 as amended from time to time (BCs) S.Cs.,S.Ts.list (Modification) Order,1956,S.Cs and S.T.s(Amendment) Act, 1976.

Certified By

Name : Guggilla Ramesh

Designation : TAHSILDAR Mandal : Sarangapur

Note: This is Digitally Signed Certificate, does not require physical signature. And this certificate can be verified at http://www.tg.meeseva.gov.in/ by furnishing the application number mentioned in the Certificate.



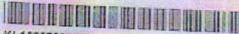


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ನಿಮ್ಮ ನಿಂತ್ಯು / Enrollment No.: 1387/30029/09761

19/08/2013

Attineni Narayana 9930 proceso SiO Venkati 1-104 Latchakkapet Nagnur Lachakkapet Karim Nagar Andhra Pradesh - 505529



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మీ ఆధార్ సంఖ్య / Your Aadhaar No. :

7726 7925 8100

ఆధార్ – సామాన్యుని హక్కు



පැරථ පුරාථලං Government of India



అర్హేమ వారాయం Attineni Narayana

තුරුව සංවල්ලේ Year of Birth 1963 තුරුතුත් / Male

7726 7925 8100



ఆధార్ – సామాన్యుని హక్కు