Form B

[See rule 4 (4)]

From	
	State Public Information Officer/ State Assistant Public Information Officer (Name of Department/Office)
То	Name and address of the applicant.
Sir,	Please refer to your application dated addressed to the
undersigned re	equesting information regarding The additional fee for
supplying this	information to you is Rs
2.	You are hereby informed to pay the fee at this office either in cash or in a
Government to	reasury through challan and send a copy of the challan to this office within
a period of fift	een days and collect the information on
3.	The amount of fee shall be deposited in the receipt head/account No. (to
be intimated to the applicant by the concerned department.)	
	nformation Officer/ nt Public Information Officer.

Financial Commissioner and Principal Secretary to Government, Haryana,
Administrative Reforms Department.