

FORM - 21

PLEASE USE THE REVERSE FOR YOUR FAX MESSAGE

### **FAX INFORMATION AND AUTHORISATION FORM**

TO: \_\_\_\_\_ Date : \_\_\_\_\_  
Fax No. : \_\_\_\_\_  
No. of Pages : \_\_\_\_\_

From: \_\_\_\_\_ Dept./Section/Centre: \_\_\_\_\_

Authorisation from HOD / HOS / HOC for official purpose:

The attached Fax message may be dispatched and the cost charged to the Dept./Section/Centre Accounts.

Date: \_\_\_\_\_

\_\_\_\_\_  
Signature of HOD / HOS / HOC