FORM UA-24 (See rule 76)		
Application for compounding of Offences		
1.	Name(s) of the Applicant	aaaa
2.	Address	dfghj
3.	Email Address	assdf@sdf.com
4.	Phone No.	9876543219
5.	The Authority/Office before whom the case is pending:	dghjk
6.	Contravention of sections or rules	jgkjhlk
7.	Brief facts of the case	kgkhkl
8.	Any other information relevant to the case	jkgkjbgk,b.kb.nkn
9.	Prayer of the Applicant	hjfjkglkhlkhlk;ljjyyyyyyyyyyyyyyyyyyyyyyyy
10.	Fee and transaction details	56000
11.	Attachment, if any	aadhar card copy

Verification

I, the applicant, do hereby declare that what is stated above is true the best of my information and belief.
Name and Signature of the Applicant
ate:
ace: