

**FORM -D**

*[See Rule-7 (1)]*

(Orissa Right to Information Rules, 2005)

Form of Memorandum of Appeal to the First Appellate Authority  
under Section 19 (1) of the Act.

From

\_\_\_\_\_

(Applicant's Name & address)

Before

**The First Appellate Authority**

1. Full name of the Appellant :
2. Address :
3. Particulars of Public Information Officer :
4. Date of receipt of the order appealed against :
5. Last date for filing the appeal :
6. Particulars of information :
  - (a) Nature and subject matter of the information required. :
  - (b) Name of the office or Department to which the information relates :
7. The grounds for appeal :  
(Details, if any, to be enclosed in separate sheet) :

**Verification**

I, \_\_\_\_\_ Name of the appellant, son / daughter / wife of  
\_\_\_\_\_ hereby declare that the particulars furnished in the appeal are to  
the best of my knowledge and belief, true and correct and that I have not suppressed any material fact.

Signature of the Appellant

Place:

Date:

To

\_\_\_\_\_

Name and address of Appellate Authority