	(4)	3	4	5	6 NIL	7	8
SI. No.	SR.No.	Name of the Person appointed Kum/Smt/ Shri	Date of Appointm ent	Whether the person is	Filled as UR or reserved	Signature of appointin g authority	
	PER	RESE	NUMBE	NEXURE N ROSTEI AME OF THE	R REGIST HE POST:-	ER As or - TYPIST RECRUI	1 31.12.2022

AO (Welfare Cell) Manager (P&IR)

ZLO(SC/ST/PWD/XSM)

Sr.Divisional Manager