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A consultancy firm to provide help for the problems of govt. employees & retired pensioners

PERFORMA

To Change of Option From 08-16-24-32 to 04-09-14 Case (ENGLISH CAPITAL LETTERS)

Name	
Father Name	
Designation	
Current Office Name	
Date Of Birth	
Aadhar Card No.	
Date Of Regular Joining	
8 Years ACP On	
16 Years ACP On	
Mobile Number & Whatsapp Number:-	
Email Address	
Residance Address & Distt	
Signature	

Important Points:-

1. Send one copy of performa by whatsapp and one by post.
2. Send one copy of Power of Attorney by whatsapp and one by post.
3. Send one copy of Aadhar Card by whatsapp and one by post.

Paytm Payment Mobile Number:- 9915031482
Google Pay Payment Mobile Number:- 9915031482
PhonePe Payment Mobile Number:- 9915031482

State Bank of India Budhlada
Distt. Mansa(Punjab)
Current A/c No.39453963229
In Favour of: Krishana Consultancy
IFSC Code: SBIN0050050
Whatsapp No - 98157-13297

POWER OF ATTORNEY

In the Court of

..... [Plaintiff/Appellant
Complainant
Petitioner

VERSUS

..... [Defendant
Respondent,
Accused

KNOW ALL to whom these present shall come that I/We undersigned appoint

for the in the above mentioned case to do all the following acts deeds and things or any of them that is to say :-

1. To act appear and plead in the above mentioned case in the court or any other Court in which the same may be tried or heard in the execution or in any stage of its progress until its final decision.
2. Present pleading appeals letter patent appeal cross objection or petitions for execution review, revisions withdrawal compromise or other petitions or affidavit or other documents as shall deemed necessary or advisable for the prosecution of the said case in all its stage.
3. To file and take back documents and to file application for restoration there of in case it is dismissed in default.
4. To withdraw or compromise the said case or submit for arbitration any difference or disputes that shall arise touching or in any manner relating to the said case.
5. To deposit draw any receive money and grant receipt there of and to do all other acts and things which may be necessary to be done for the progress and in the case of prosecutions of said case.
6. To employee and other legal practitioner authorising him to exercise the power and authorities hereby conferred on the advocate whenever he may think fit to do so.

And I/We hereby agree to ratify whatever the Advocate or his substitute shall do in the promises.

And I/We hereby agree not to hold the Advocate or his substitute responsible for the result of said for hearing case in consequence from the court when the said case is called up or for any negligence of the said Advocate or his substitute.

And I/We hereby agree that in the event of whole or any part of fee agreed by me to be paid to the Advocate, remaining unpaid he shall be entitled to withdraw from the prosecution of the said case until the same is paid if any costs are allowed for an adjournment the advocate would be entitled to the same.

IN WITNESS WHERE OF I/We agree to set my/our hands to the represent the contents of which have been explained to understand by me/us this the
.....day..... 20.....

(Signature or Thumb Impression of client)

Accepted :