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A consultancy firm to provide help for the problems of govt. employees & retired pensioners PERFORMA (ENGLISH CAPITAL LETTERS) Writ Regarding To count Haryana school service for pension benefit.

Name	
Father's Name	
Designation	
School Name	
Date Of Birth	
Aadhar Card No.	
Date Of Appointment In Punjab Govt. Service	
Date Of Regular	
Date Of Retirement	
Period of Haryana School Service	
Mobile Number	
Whats App Number	
Email Address	
Residence Address	
Signature	

**Important Points:-**

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

- In case of female, write the name of husband in address. 1.
- Send one copy of performa by whatsapp and one by post. 2.
- 3. Write tehsil and distt. name in school and residence address.
- 4. Send one copy of Private aided school service experience
- 3. Send one copy of Aadhar Card by whatsapp and one by post.

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		
	VERSUS	Plaintiff/Appeallant Complainant Petitioner Defendant
	om these present shall come that	
for the	in the above mention	ed case to do all the following acts
deeds and things or ar 1. To act appear and plea	ny of them that is to say:- ad in the above mentioned case	in the court or any other Court in or in any stage of its progress until
<ol><li>Present pleading apperent review, revisions withdom</li></ol>	rawal compromise or other petitio	ojection or petitions for execution ons or affidavit or other documents ecution of the said case in all its
<ol><li>To file and take back do dismissed in default.</li></ol>		or restoration there of in case it is
that shall arise touching 5. To deposit draw any red	g or in any manner relating to the ceive money and grant receipt th	bitration any difference or disputes said case. ere of and to do all other acts and ss and in the case of prosecutions
<ol><li>To employee and other authorities hereby conf And I/We hereby agree</li></ol>	erred on the advocate whenever	him to exercise the power and he may think fit to do so. e or his substitute shall do in the
of said for hearing case for any negligence of the	in consequence from the court versions and advocate or his substitute	
to the Advocate, remain	ning unpaid he shall be entitled to ame is paid if any costs are allowe	part of fee agreed by me to be paid withdraw from the prosecution of d for an adjournment the advocate
which have been explai	I/We agree to set my/our hands ned to understand by me/us this t	

Accepted:

(Signature or Thumb Impression of client)