SHEET FOR RECORDING VERIFICATION REMARKS BY THE VERIFYING AUTHORITY

Name of Department/Establishment:- Directorate of Border Affairs

Date of Physical Verification:-

SI No.	Name of Employee	Designation	Scale pay or fixed wages	Date of appointment	Copy of Appointment order	PID	Remarks by Verifying Authority
1	2	3	4	5	6	7	8
01.	Shri V. Sekhose (Rtd Secretary) (ND-Jo La ValCan	Consultant		6			0
02.	Shri A.K. Das (Rtd Dy.Directoe)	Consultant			7,		
	(NO-Jo & Valce	/		Ψ.			
03.	Shri R. Nzanbemo Lotha					1	
	(NO)- do he raken)			55		
04.	Shri Subenthung Kikon	Consultant (GIS)					
	(NOT- to be later)					
05.	Smti Tangtikala	Sweeper (Fixed	17.7.06	Yes	Yes	Appointed from Gout.
06.	Smti Mary Sangtam	Sweeper	13.0		Yes	Yes	Appointed from Gout. Level. Gout. approval Shaon. Appointment from Gout. Le Gout approval indicated in order
7.	Smti Imlinaro	Peon			Yos	Yes	Gout approval indicated

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	08.	Shri Shikuto N. Assumi	LDA cum Computer Assistant	6	,*	ABSENT
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Name & Signature of Departmental Representative:-

Name & Signature of Verifying Team Members:-