

FORM IV

FORM OF APPLICATION FOR SUPPLY OF COPIES OF RECORDS

**To,
The Commissioner,
Andhra Pradesh State Archives,
Tarnaka,
HYDERABAD - 500 007.**

Sir,

I have been permitted to consult records in your Department. I require Xerox / Microfilm (Positive) copies / Photo enlargements of the Records/Books/MSS mentioned below for use in my research. I undertake to pay the charges on intimation from you.

1. Full Name :
2. Designation :
3. Particulars of the Books/Manuscripts/Printed Reports/Records

	<u>Department/Title</u>	<u>Year</u>	<u>Page Nos. to be Xeroxed / Micro filmed.</u>
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6. Address : Signature (Full)

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The applicant may be advised to note down the required information from the records.

Jr.Asst.

Archivist

Assistant Director