

VAKALATNAMA

IN THE COURT OF

NOOF 201

} Plaintiff
} Complainant
} Applicant
} Appellant

Versus

} Defendant
} Accused
} Respondent/s
} Opponent/s

I/We _____ The _____

Above Named Do Hereby Appoint and Authorize to **Shri Shashikant B. Goswami** and
_____ **Advocate**, Office At **SOHAIL & CO.**, M-4, Shrinath
Complex, Opp. Jivan Jyot Cinema, Udhna, Surat. As My/Our Advocate to Act Appear and
Plead for Me/us in the above Matter with Authority to Compromise or Withdraw the Same
And Also Authorize To Take Papers And To Receive Money from the Court for Me/us As
Advocate in the above mentioned Proceedings

In Witness Whereof I/We Whereof I/We Set My/our Hand on This Writing

This _____ Day Of _____ 200

Signature: _____

Accepted:

Shashikant B.Goswami and
(VDR/BRD/10606)

SOHAIL & CO.
M-4, Shrinath Complex ,
Opp.Jivan Jyot cinema, Udhna,
Surat. Ph: (0261) 2271311.