VAKALATNAMA

IN THE COURT OF

		NOOF 201		
			} } }	Plaintiff Complainant Applicant Appellant
		Versus	<pre>} } } }</pre>	Defendant Accused Respondent/s Opponent/s
I	/We		The	
Above Name	ed Do Hereby Appoint an	d Authorize to Shri	Shashikant 1	B. Goswami and
	Ad	vocate, Office At S	OHAIL & C	O., M-4, Shrinath
Complex, O	pp. Jivan Jyot Cinema, U	dhna, Surat. As My/	Our Advocat	e to Act Appear and
Plead for M	e/us in the above Matter v	with Authority to Co	mpromise or	Withdraw the Same
And Also A	uthorize To Take Papers	And To Receive Mo	ney from the	Court for Me/us As
Advocate in	the above mentioned Pro	ceedings		
Iı	n Witness Whereof I/We	Whereof I/We Set M	Iy/our Hand o	on This Writing
This	Day Of	200		
		Sign	ature:	
Accepted:				
Shashikant (VDR/BRD/	B.Goswami and (10606)			
SOHAIL & M-4, Shrinat				

Opp.Jivan Jyot cinema, Udhna, Surat. Ph: (0261) 2271311.