

**Form-A**

(To be filled in Capital letters)

**ADVOCATE'S DETAILS FOR UPDATION OF MASTER DATABASE IN THE CIS 3.2**

Name of Advocate (Short name for Cause-list)	
Full Name	
Date of Birth	
Bar Registration No.	
Gender	
E-mail ID	
Mobile No.	
ADVOCATE TYPE : Govt. Pleader /Law Firm / Legal Aid (Tick whichever is applicable)	

<b>FOR OFFICE USE</b>
<b>Advocate code:</b> <input type="text"/>
<b>Remarks if any:</b>  
<b>Acknowledgement received date:</b>

	<b>Office / Chamber</b>	<b>Residence</b>
Address		
State & PIN		
District		
Town		
Ward		
Taluka / Sub-Div.		
Village		

Date:

**Signature of Advocate**

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**Acknowledgement Slip**

Name of Advocate		<b>FOR OFFICE USE ONLY</b>
Mobile No.		<b>Advocate's Code:</b>