

ORIGINAL

REGD. No.: 24170701

DISTRICT LEGAL SERVICES AUTHORITY, MULUGU
WRITTEN TEST FOR THE POST OF Record - Assistant
HALL TICKET-CUM-IDENTITY SHEET

DATE	TIME	NAME OF THE EXAMINATION CENTER
14/9/25	2:30 pm - 4 pm	Govt. Jr. college, opp: Govt. Area Hospital, mulugu
NAME AND FULL POSTAL ADDRESS OF THE CANDIDATE		
(to be filled by the Candidate)		
H.No 2-107 Shimmarapeta (v) Entoor (m) khammam (D) Telangana P.No : 9346139343 507168		
Signature of the Candidate		P. Siva krishna



SECRETARY
DISTRICT LEGAL SERVICES AUTHORITY,
MULUGU

DUPLICATE

DISTRICT LEGAL SERVICES AUTHORITY, MULUGU
WRITTEN TEST FOR THE POST OF Record - Assistant
HALL TICKET-CUM-IDENTITY SHEET 24170701

DATE	TIME	NAME OF THE EXAMINATION CENTER
14/9/25	2:30 pm - 4 pm	Govt. Jr. college, opp: Govt. Area Hospital, mulugu
NAME AND FULL POSTAL ADDRESS OF THE CANDIDATE		
(to be filled by the Candidate)		
H.No - 2-107, Shimmarapeta (v) Entoor (m) khammam (D) Telangana P.No: 9346139343 507168		
Signature of the Candidate		P. Siva krishna

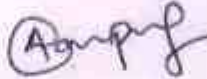


SECRETARY
DISTRICT LEGAL SERVICES AUTHORITY,
MULUGU.

ORIGINAL

REGD. No.: 24170702

DISTRICT LEGAL SERVICES AUTHORITY : MULUGU
WRITTEN TEST FOR THE POST OF RECORD ASSISTANT
HALL TICKET-CUM-IDENTITY SHEET

DATE	TIME	NAME OF THE EXAMINATION CENTER
14/9/25	2:30pm-4pm	Govt. Jr. College, opp: Govt Area Hospital mulugu
NAME AND FULL POSTAL ADDRESS OF THE CANDIDATE		
(to be filled by the Candidate)		
ANUMULA PRAVEEN (V) JAMPANGAVAI (M) SSTADVAI, (Post) Oorattam (D) mulugu, 506347, Telangana H. NO:- 5-2, 9440020395		
Signature of the Candidate		  Gazetted Head Master Govt. High School, Mulugu Mdl: & Dist: Mulugu

SECRETARY
DISTRICT LEGAL SERVICES AUTHORITY,
MULUGU

DUPLICATE

DISTRICT LEGAL SERVICES AUTHORITY : MULUGU
WRITTEN TEST FOR THE POST OF RECORD ASSISTANT

HALL TICKET-CUM-IDENTITY SHEET 24170702

DATE	TIME	NAME OF THE EXAMINATION CENTER
14/9/25	2:30pm-4pm	Govt. Jr. College, mulugu
15/12/2024	10:30AM	District Court Complex mulugu
NAME AND FULL POSTAL ADDRESS OF THE CANDIDATE		
(to be filled by the Candidate)		
Anumula Praveen (V) Jampangavai (M) SSTADVAI (Post) Oorattam (D) mulugu, 506347, Telangana H. NO:- 5-2, 9440020395		
Signature of the Candidate		  Gazetted Head Master Govt. High School, Mulugu Mdl: & Dist: Mulugu

SECRETARY
DISTRICT LEGAL SERVICES AUTHORITY,
MULUGU,

ORIGINAL

REGD. No.: 24170703

DISTRICT LEGAL SERVICES AUTHORITY : MULUGU
WRITTEN TEST FOR THE POST OF RECORD ASSISTANT
HALL TICKET-CUM-IDENTITY SHEET

DATE	TIME	NAME OF THE EXAMINATION CENTER
14/9/25	2:30pm-4pm	Govt. Jy College opp: Govt. Area Hospital Mulugu.
NAME AND FULL POSTAL ADDRESS OF THE CANDIDATE		
(to be filled by the Candidate)		
MAHAMAD. SAMEER AHMED M H.NO: 4-54, GAUCHERLA, SANGEM, WARANGAL, 506310, TG.		
Signature of the Candidate		 G. PRABHAKAR Associate NCC Officer Rank: Flying Officer No. NCC/0113001 4 (T) Air SQN NCC Warangal - 1 S
Mt. Sameer Ahmed		

SECRETARY

DISTRICT LEGAL SERVICES AUTHORITY,
MULUGU

DUPLICATE

DISTRICT LEGAL SERVICES AUTHORITY : MULUGU
WRITTEN TEST FOR THE POST OF RECORD ASSISTANT

HALL TICKET-CUM-IDENTITY SHEET 24170703

DATE	TIME	NAME OF THE EXAMINATION CENTER
14/9/25	2:30pm-4pm	(to be filled by the Candidate) Govt. Jy College opp: Govt. Hospital Mulugu
NAME AND FULL POSTAL ADDRESS OF THE CANDIDATE		
(to be filled by the Candidate)		
MAHAMAD SAMEER AHMED M H.NO: 4-54, GAUCHERLA, SANGEM, WARANGAL. 506310, TG		
Signature of the Candidate		 G. PRABHAKAR Associate NCC Officer Rank: Flying Officer No. NCC/0113001 4 (T) Air SQN NCC Warangal - 1 S
Mt. Sameer Ahmed		

SECRETARY

DISTRICT LEGAL SERVICES AUTHORITY,
MULUGU.

ORIGINAL

REGD. No.: 24170704

DISTRICT LEGAL SERVICES AUTHORITY : MULUGU
WRITTEN TEST FOR THE POST OF Record Assistant
HALL TICKET-CUM-IDENTITY SHEET

DATE	TIME	NAME OF THE EXAMINATION CENTER
14/9/25	2:30pm-4pm	Govt. Jr. College opp: Govt. Area Hospital Mulugu
NAME AND FULL POSTAL ADDRESS OF THE CANDIDATE		
(to be filled by the Candidate)		
MOHAMMAD. AFRIN D/o MADAR # 2-304/A MMD GHOUSEPALLY, MULUGU		
Md. Afrin Signature of the Candidate		 Government Degree College NARSAMPET

SECRETARY
DISTRICT LEGAL SERVICES AUTHORITY,
MULUGU

DUPLICATE

DISTRICT LEGAL SERVICES AUTHORITY : MULUGU
WRITTEN TEST FOR THE POST OF Record Assistant

HALL TICKET-CUM-IDENTITY SHEET

24170704

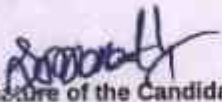
DATE	TIME	NAME OF THE EXAMINATION CENTER
14/9/25	2:30pm-4pm	(to be filled by the Candidate) Govt. Jr. College opp: Govt. Area Hospital Mulugu
NAME AND FULL POSTAL ADDRESS OF THE CANDIDATE		
(to be filled by the Candidate)		
MOHAMMAD. AFRIN D/o MADAR # 2-304/A MMD GHOUSEPALLY, MULUGU		
Md. Afrin Signature of the Candidate		 Government Degree College NARSAMPET

SECRETARY
DISTRICT LEGAL SERVICES AUTHORITY,
MULUGU.

ORIGINAL

REGD. No.: 24170705

DISTRICT LEGAL SERVICES AUTHORITY : MULUGU
WRITTEN TEST FOR THE POST OF Record Assistant
HALL TICKET-CUM-IDENTITY SHEET

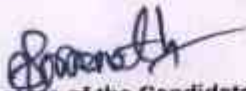
DATE	TIME	NAME OF THE EXAMINATION CENTER
14/9/25	2:30pm-4pm	Govt. Jn College, opp: Govt Area Hospital mulugu
NAME AND FULL POSTAL ADDRESS OF THE CANDIDATE		
(to be filled by the Candidate)		
Narage Somanath GOVINDARAO PET. PIN 506344 INDIAN POSTAL. GOVINDARAO PET District MULUGU.		
 Signature of the Candidate		 RASIA COLLEGE GOVINDARAO PET. Jayashankar Dist. Bhupalpaty

SECRETARY
DISTRICT LEGAL SERVICES AUTHORITY,
MULUGU

DUPLICATE

DISTRICT LEGAL SERVICES AUTHORITY : MULUGU
WRITTEN TEST FOR THE POST OF RECORD ASSISTANT

HALL TICKET-CUM-IDENTITY SHEET 24170705

DATE	TIME	NAME OF THE EXAMINATION CENTER
14/9/25	2:30pm-4pm	(to be filled by the Candidate) Govt. Jn College, opp: Govt Area Hospital mulugu
NAME AND FULL POSTAL ADDRESS OF THE CANDIDATE		
(to be filled by the Candidate)		
INDIA POSTAL. GOVINDARAO PET PIN 506344.		
 Signature of the Candidate		 RASIA JL COLLEGE GOVINDARAO PET. Jayashankar Dist. Bhupalpaty

SECRETARY
DISTRICT LEGAL SERVICES AUTHORITY,
MULUGU.

ORIGINAL

REGD. No.: 24170706

DISTRICT LEGAL SERVICES AUTHORITY : MULUGU
 WRITTEN TEST FOR THE POST OF RECORD ASSISTANT
 HALL TICKET-CUM-IDENTITY SHEET

DATE	TIME	NAME OF THE EXAMINATION CENTER
14/9/25	2:30pm-4pm	Govt. Jru College, opp: Govt. Area Hospital mulugu
NAME AND FULL POSTAL ADDRESS OF THE CANDIDATE		
(to be filled by the Candidate)		
Kethepalli Sai Srilekha H.No. 20-4-55, Road no.7, Sriram Nagar, Bonakal Road, Khammam, Telangana -507001.		
K. Sai Srilekha. Signature of the Candidate		 Gazetted Headmaster Z.P.H.S. NERADA Chithakani (M) Khammam (Dt)

SECRETARY
 DISTRICT LEGAL SERVICES AUTHORITY,
 MULUGU

DUPLICATE

DISTRICT LEGAL SERVICES AUTHORITY : MULUGU
 WRITTEN TEST FOR THE POST OF RECORD ASSISTANT

HALL TICKET-CUM-IDENTITY SHEET 24170706

DATE	TIME	NAME OF THE EXAMINATION CENTER
14/9/25	2:30pm-4pm	(to be filled by the Candidate) Govt. Junior College, opp: Govt. Area Hospital mulugu.
NAME AND FULL POSTAL ADDRESS OF THE CANDIDATE		
(to be filled by the Candidate)		
Kethepalli Sai Srilekha H.No. 20-4-55, Road no.7, Sriram Nagar, Bonakal Road, Khammam, Telangana -507001		
K. Sai Srilekha. Signature of the Candidate		 Gazetted Headmaster Z.P.H.S. NERADA Chithakani (M) Khammam (Dt)

SECRETARY
 DISTRICT LEGAL SERVICES AUTHORITY,
 MULUGU.

ORIGINAL

REGD. No.: 24170707

DISTRICT LEGAL SERVICES AUTHORITY : MULUGU
WRITTEN TEST FOR THE POST OF RECORD ASSISTANT
HALL TICKET-CUM-IDENTITY SHEET

DATE	TIME	NAME OF THE EXAMINATION CENTER
14/9/25	2:30pm-4pm	Govt. Junior College, opp:- Govt Area Hospital mulugu
NAME AND FULL POSTAL ADDRESS OF THE CANDIDATE		
(to be filled by the Candidate) ANKESHWARAPU SARALA H.No. 3-14-613/3/2/1 LANE No. 6. VINAYAKANAGAR KOTHUR K.U.C. HANUMAKONDA		
A. Sarala Signature of the Candidate		Ch. J. A. S. Officer & ACB Cases-Cum-iii Addl. District and Sessions Judge, Warangal

SECRETARY

DISTRICT LEGAL SERVICES AUTHORITY,
MULUGU

DUPLICATE

DISTRICT LEGAL SERVICES AUTHORITY : MULUGU
WRITTEN TEST FOR THE POST OF Record Assistant

HALL TICKET-CUM-IDENTITY SHEET

24170707

DATE	TIME	NAME OF THE EXAMINATION CENTER
14/9/25	2:30pm-4pm	(to be filled by the Candidate) Govt. Junior College, opp:- Govt Area Hospital mulugu
NAME AND FULL POSTAL ADDRESS OF THE CANDIDATE		
(to be filled by the Candidate) ANKESHWARAPU SARALA H.No. 3-14-613/3/2/1 LANE No. 6 VINAYAKANAGAR KOTHUR K.U.C. HANUMAKONDA		
A. Sarala Signature of the Candidate		Ch. J. A. S. Officer & ACB Cases-Cum-iii Addl. District and Sessions Judge, Warangal

SECRETARY

DISTRICT LEGAL SERVICES AUTHORITY,
MULUGU,

ORIGINAL

REGD. No.: 24170708

DISTRICT LEGAL SERVICES AUTHORITY - MULUGU WRITTEN TEST FOR THE POST OF Record Assistant HALL TICKET-CUM-IDENTITY SHEET

DATE	TIME	NAME OF THE EXAMINATION CENTER
14/9/25	2:30pm-4pm	Govt. Junior College opp: Govt. Area Hospital Mulugu
NAME AND FULL POSTAL ADDRESS OF THE CANDIDATE		
(to be filled by the Candidate)		
ELLAMBATLA SAI THARUN S/O RAMESH H.No: 7-107, SHANTHI NAGAR PALAKURTHY (VEM), JANGAON - 506146		
Signature of the Candidate		E. Sai Tharun



SECRETARY

DISTRICT LEGAL SERVICES AUTHORITY,
MULUGU

DUPLICATE

DISTRICT LEGAL SERVICES AUTHORITY - MULUGU WRITTEN TEST FOR THE POST OF Record Assistant

HALL TICKET-CUM-IDENTITY SHEET 24170708

DATE	TIME	NAME OF THE EXAMINATION CENTER
14/9/25	2:30pm-4pm	(to be filled by the Candidate) Govt. Junior College opp: Govt. Area Hospital Mulugu
NAME AND FULL POSTAL ADDRESS OF THE CANDIDATE		
(to be filled by the Candidate)		
ELLAMBATLA SAI THARUN S/O RAMESH H.No: 7-107, SHANTHI NAGAR PALAKURTHY (VEM), JANGAON - 506146		
Signature of the Candidate		E. Sai Tharun



SECRETARY

DISTRICT LEGAL SERVICES AUTHORITY,
MULUGU.

ORIGINAL

REGD. No.: 24170709

DISTRICT LEGAL SERVICES AUTHORITY : MULUGU
 WRITTEN TEST FOR THE POST OF Record Assistant
 HALL TICKET-CUM-IDENTITY SHEET

DATE	TIME	NAME OF THE EXAMINATION CENTER
14/9/25	2:30pm-4pm	Govt. Junior College, Govt. Area Hospital, Mulugu
NAME AND FULL POSTAL ADDRESS OF THE CANDIDATE		
(to be filled by the Candidate)		
KANNEBOINA NAVITHA 3-47, Bajwapuram, Chinthakani, Khammam. PIN CODE - 507318		
K. Navitha Signature of the Candidate		 Veterinary Assistant Surgeon Primary Veterinary Center, GOVINDAPUR M Bonakal Ndi, Khammam Dist.

SECRETARY
 DISTRICT LEGAL SERVICES AUTHORITY,
 MULUGU

DUPLICATE

DISTRICT LEGAL SERVICES AUTHORITY : MULUGU
 WRITTEN TEST FOR THE POST OF Record Assistant

HALL TICKET-CUM-IDENTITY SHEET

DATE	TIME	NAME OF THE EXAMINATION CENTER
14/9/25	2:30pm-4pm	(to be filled by the Candidate)
15/12/2024	10:30am	District Court Complex, Mulugu.
NAME AND FULL POSTAL ADDRESS OF THE CANDIDATE		
(to be filled by the Candidate)		
KANNEBOINA NAVITHA 3-47, Baswapuram, Chinthakani, Khammam PIN CODE - 507318		
K. Navitha Signature of the Candidate		 Veterinary Assistant Surgeon Primary Veterinary Center, GOVINDAPUR M Bonakal Ndi, Khammam Dist.

SECRETARY
 DISTRICT LEGAL SERVICES AUTHORITY,
 MULUGU.

ORIGINAL

REGD. No.: 24170710

DISTRICT LEGAL SERVICES AUTHORITY : MULUGU WRITTEN TEST FOR THE POST OF RECORD ASSISTANT HALL TICKET-CUM-IDENTITY SHEET

DATE	TIME	NAME OF THE EXAMINATION CENTER
14/9/25	2:30pm-4pm	Govt. Junior College, opp: Govt. Area Hospital Mulugu
NAME AND FULL POSTAL ADDRESS OF THE CANDIDATE		
(to be filled by the Candidate)		
AKULA GANESH S/O AKULA JAYARAMU H.NO. 7-70 VIL: POCHANNA PET MDL: BACHA -NNA PET DI: JANGAON PIN: 506221		
Signature of the Candidate		 Headmaster POCHANNA PET Dist: Jangaon

SECRETARY
DISTRICT LEGAL SERVICES AUTHORITY,
MULUGU

DUPLICATE

DISTRICT LEGAL SERVICES AUTHORITY : MULUGU WRITTEN TEST FOR THE POST OF RECORD ASSISTANT

HALL TICKET-CUM-IDENTITY SHEET 24170710

DATE	TIME	NAME OF THE EXAMINATION CENTER
14/9/25	2:30pm-4pm	(to be filled by the Candidate) Govt. Junior College, opp: Govt. Area Hospital Mulugu
NAME AND FULL POSTAL ADDRESS OF THE CANDIDATE		
(to be filled by the Candidate)		
AKULA GANESH S/O AKULA JAYARAMU H.NO. 7-70. POCHANNA PET (VIL), BACHANNA -PET (MDL), JANGAON DIST: PIN - 506221		
Signature of the Candidate		 Headmaster POCHANNA PET Dist: Jangaon

SECRETARY
DISTRICT LEGAL SERVICES AUTHORITY,
MULUGU.

ORIGINAL

REGD. No.: 24170311

DISTRICT LEGAL SERVICES AUTHORITY : MULUGU
WRITTEN TEST FOR THE POST OF RECORD-ASSISTANT
HALL TICKET-CUM-IDENTITY SHEET

DATE	TIME	NAME OF THE EXAMINATION CENTER
14/9/25	2:30pm-4pm	Govt. Junior College opp: Govt. Area Hospital Mulugu
NAME AND FULL POSTAL ADDRESS OF THE CANDIDATE		
(to be filled by the Candidate) Gurrala. Srikanth, s/o. Sambiah, A. No. 1-36, Seethampet, Mahabubnagar District. Hammakonda mob: 9666 797 102		
Signature of the Candidate G. Srikanth.		



SECRETARY
DISTRICT LEGAL SERVICES AUTHORITY,
MULUGU

DUPLICATE

DISTRICT LEGAL SERVICES AUTHORITY : MULUGU
WRITTEN TEST FOR THE POST OF RECORD-ASSISTANT

HALL TICKET-CUM-IDENTITY SHEET 24170311

DATE	TIME	NAME OF THE EXAMINATION CENTER
14/9/25	2:30pm-4pm	(to be filled by the Candidate) Govt. Junior College opp: Govt. Area Hospital Mulugu
NAME AND FULL POSTAL ADDRESS OF THE CANDIDATE		
(to be filled by the Candidate) Gurrala. Srikanth, s/o. Sambiah, A. No. 1-36, Seethampet, Mahabubnagar District. Hammakonda mob: 9666 797 102		
Signature of the Candidate G. Srikanth.		



SECRETARY
DISTRICT LEGAL SERVICES AUTHORITY,
MULUGU

ORIGINAL

REGD. No.: 24170712

DISTRICT LEGAL SERVICES AUTHORITY 'MULUGU WRITTEN TEST FOR THE POST OF RECORD ASSISTANT HALL TICKET-CUM-IDENTITY SHEET

DATE	TIME	NAME OF THE EXAMINATION CENTER
14/9/25	2:30pm-4pm	Gort. Jr. College, opp. Gort. Hospital, Mulugu
15-12-2024	10:30 AM	DISTRICT COURT COMPLEX, MULUGU
NAME AND FULL POSTAL ADDRESS OF THE CANDIDATE		
(to be filled by the Candidate)		
PRATHAPAGIRI. SRIKANTH.		
H.NO: 3-17, VILLAGE: JANGALAPALLY, MDL: MULUGU		
DISTRICT: MULUGU, 506352		
Signature of the Candidate		P. Srikanth



Medical Officer
PHC NALLABELLY
Dist. Warangal

SECRETARY
DISTRICT LEGAL SERVICES AUTHORITY,
MULUGU

DUPLICATE

DISTRICT LEGAL SERVICES AUTHORITY : MULUGU WRITTEN TEST FOR THE POST OF RECORD ASSISTANT HALL TICKET-CUM-IDENTITY SHEET

DATE	TIME	NAME OF THE EXAMINATION CENTER
14/9/25	2:30pm-4pm	Gort. Junior College, opp. Gort. Area Hospital, Mulugu
15-12-2024	10:30 AM	DISTRICT COURT COMPLEX, MULUGU
NAME AND FULL POSTAL ADDRESS OF THE CANDIDATE		
(to be filled by the Candidate)		
PRATHAPAGIRI SRIKANTH		
H.NO: 3-17, VILLAGE: JANGALAPALLY, MDL: MULUGU		
DISTRICT: MULUGU, 506352		
Signature of the Candidate		P. Srikanth



Medical Officer
PHC NALLABELLY
Dist. Warangal

SECRETARY
DISTRICT LEGAL SERVICES AUTHORITY,
MULUGU.

ORIGINAL

REGD. No.: 24170713

DISTRICT LEGAL SERVICES AUTHORITY : MULUGU
WRITTEN TEST FOR THE POST OF Record Assistant
HALL TICKET-CUM-IDENTITY SHEET

DATE	TIME	NAME OF THE EXAMINATION CENTER
14/9/25	2:30pm-4pm	Gort. Junior College, opp: Gort. Area Hospital mulugu.
NAME AND FULL POSTAL ADDRESS OF THE CANDIDATE		
(to be filled by the Candidate)		
THADUKA BHARGAV, 1-25 Ramappa street, palampet village, venkatapur ml. Mulugu Dist Pin 506305.		
Signature of the Candidate		T. Bhargav.



SECRETARY
DISTRICT LEGAL SERVICES AUTHORITY,
MULUGU

DUPLICATE

DISTRICT LEGAL SERVICES AUTHORITY : MULUGU
WRITTEN TEST FOR THE POST OF Record Assistant.

HALL TICKET-CUM-IDENTITY SHEET 24170713

DATE	TIME	NAME OF THE EXAMINATION CENTER
14/9/25	2:30pm-4pm	(to be filled by the Candidate) Gort. Junior College opp: Gort. Area Hospital mulugu
NAME AND FULL POSTAL ADDRESS OF THE CANDIDATE		
(to be filled by the Candidate)		
THADUKA BHARGAV. 1-25 Ramappa. street, palampet, village, venkatapur, ml. Mulugu, Dist Pin- 506305.		
Signature of the Candidate		T. Bhargav.



SECRETARY
DISTRICT LEGAL SERVICES AUTHORITY,
MULUGU

ORIGINAL

REGD. No.: 24170714

DISTRICT LEGAL SERVICES AUTHORITY: Mulugu
 WRITTEN TEST FOR THE POST OF Record Assistant
 HALL TICKET-CUM-IDENTITY SHEET

DATE	TIME	NAME OF THE EXAMINATION CENTER
14/9/25	2:30pm-4pm	Gort. Junior College, opp: Gort Area Hospital Mulugu
NAME AND FULL POSTAL ADDRESS OF THE CANDIDATE		
(to be filled by the Candidate)		
shyaman praveen, s/o: shyaman murali R/o:- H.NO. 05-40, vil - Gangaram, nelli:- katarani dist - Jayashankar Bhupalpally, Pincode-505503		
Signature of the Candidate		 S.W. Gazetted Headmistress ZPHS: BHUPALPALLY Dt. Jayashankar Bhupalpally

SECRETARY
 DISTRICT LEGAL SERVICES AUTHORITY,
Mulugu

DUPLICATE

DISTRICT LEGAL SERVICES AUTHORITY: Mulugu
 WRITTEN TEST FOR THE POST OF Record Assistant
 HALL TICKET-CUM-IDENTITY SHEET
 24170714

DATE	TIME	NAME OF THE EXAMINATION CENTER
14/9/25	2:30pm-4pm	(to be filled by the Candidate) Gort. Junior College, opp: Gort Area Hospital Mulugu
NAME AND FULL POSTAL ADDRESS OF THE CANDIDATE		
(to be filled by the Candidate)		
shyaman praveen, s/o. shyaman murali R/o:- H.NO. 05-40, vil - Gangaram, nelli:- katarani; dist:- Jayashankar Bhupalpally Pincode-505503		
Signature of the Candidate		 S.W. Gazetted Headmistress ZPHS: BHUPALPALLY Dt. Jayashankar Bhupalpally

SECRETARY
 DISTRICT LEGAL SERVICES AUTHORITY,

ORIGINAL

REGD. No.:

24170715

DISTRICT LEGAL SERVICES AUTHORITY: MULUGU
WRITTEN TEST FOR THE POST OF RECORD ASSISTANT
HALL TICKET-CUM-IDENTITY SHEET

DATE	TIME	NAME OF THE EXAMINATION CENTER
15-12-2024 14/9/25	2:30pm - 4pm	Govt. Junior College, Opp: Govt. Area Hospital, Mulugu
NAME AND FULL POSTAL ADDRESS OF THE CANDIDATE		
(to be filled by the Candidate)		
SHER. AMJATHPASHA 4-1-29/A REDDY BAZAR MAHABUBABAD - 506101		
Signature of the Candidate		 DR. C. RAMESH, Reg. A AREA HOSPITAL, Dist. Mahabubabad.

SECRETARY
DISTRICT LEGAL SERVICES AUTHORITY,
MULUGU

DUPLICATE

DISTRICT LEGAL SERVICES AUTHORITY: MULUGU
WRITTEN TEST FOR THE POST OF RECORD ASSISTANT
HALL TICKET-CUM-IDENTITY SHEET

DATE	TIME	NAME OF THE EXAMINATION CENTER
15-12-2024 14/9/25	10:30 AM 2:30pm - 4pm	(to be filled by the Candidate) Govt. Junior College, Opp: Govt. Hospital, Mulugu
NAME AND FULL POSTAL ADDRESS OF THE CANDIDATE		
(to be filled by the Candidate)		
SHER. AMJATHPASHA 4-1-29/A REDDY BAZAR MAHABUBABAD - 506101		
Signature of the Candidate		 DR. C. RAMESH, Reg. A AREA HOSPITAL, Dist. Mahabubabad.

ORIGINAL

REGD. No.: 24170716

DISTRICT LEGAL SERVICES AUTHORITY :MULUGU
WRITTEN TEST FOR THE POST OF RECORD ASSISTANT
HALL TICKET-CUM-IDENTITY SHEET

DATE	TIME	NAME OF THE EXAMINATION CENTER
14/9/25	2:30pm-4pm	Govt. Junior College, opp: Govt. Area Hospital Mulugu
NAME AND FULL POSTAL ADDRESS OF THE CANDIDATE		
(to be filled by the Candidate)		
RAJU. G. H.NO. 1-79, Jangalapally crossroad Jangalapally village, Mulugu. Dist		
Signature of the Candidate		 <i>[Signature]</i> Dr. SUDHAKAR BATHINI Regional Civil Asst. Surgeon Police Training Centre Mannoor, Warangal (U)

SECRETARY
DISTRICT LEGAL SERVICES AUTHORITY,
MULUGU

DUPLICATE

DISTRICT LEGAL SERVICES AUTHORITY : MULUGU
WRITTEN TEST FOR THE POST OF RECORD ASSISTANT.

HALL TICKET-CUM-IDENTITY SHEET 24170716

DATE	TIME	NAME OF THE EXAMINATION CENTER
14/9/25	2:30pm-4pm	(to be filled by the Candidate) Govt. Junior College opp: Govt. Area Hospital mulugu
NAME AND FULL POSTAL ADDRESS OF THE CANDIDATE		
(to be filled by the Candidate)		
RAJU. G. H.NO. 1-79, Jangalapally crossroad Jangalapally village, Mulugu dist Contact: 8322369730.		
Signature of the Candidate		 <i>[Signature]</i> Dr. SUDHAKAR BATHINI Regional Civil Asst. Surgeon Police Training Centre Mannoor, Warangal (U)

SECRETARY
DISTRICT LEGAL SERVICES AUTHORITY,
MULUGU.

ORIGINALREGD. No.: 24170717DISTRICT LEGAL SERVICES AUTHORITY : MULUGUWRITTEN TEST FOR THE POST OF Record Assistant**HALL TICKET-CUM-IDENTITY SHEET**

DATE	TIME	NAME OF THE EXAMINATION CENTER
14/9/25	2:30pm-4pm	Govt. Junior College opp: Govt. Area Hospital Mulugu
NAME AND FULL POSTAL ADDRESS OF THE CANDIDATE		
(to be filled by the Candidate)		
BOJJA VINAY SENA 3-3-44, TAILOR STREET, HANAMKONDA - 506001		
Signature of the Candidate		 Dr. K. SURENDER M.D., D.C.H Professor of Pediatrics GMC Jayashankar Bhupalpally

SECRETARY
DISTRICT LEGAL SERVICES AUTHORITY,
MULUGU

DUPLICATEDISTRICT LEGAL SERVICES AUTHORITY : MULUGUWRITTEN TEST FOR THE POST OF Record Assistant**HALL TICKET-CUM-IDENTITY SHEET** 24170717

DATE	TIME	NAME OF THE EXAMINATION CENTER
14/9/25	2:30pm-4pm	(to be filled by the Candidate) Govt. Junior College, opp: Govt. Area Hospital mulugu
NAME AND FULL POSTAL ADDRESS OF THE CANDIDATE		
(to be filled by the Candidate)		
BOJJA VINAY SENA 3-3-44, TAILOR STREET, HANAMKONDA 506001		
Signature of the Candidate		 Dr. K. SURENDER M.D., D.C.H Professor of Pediatrics GMC Jayashankar Bhupalpally

SECRETARY
DISTRICT LEGAL SERVICES AUTHORITY,
MULUGU

ORIGINAL

REGD. No.: 24170718

DISTRICT LEGAL SERVICES AUTHORITY: Mulugu
WRITTEN TEST FOR THE POST OF Record Assistant
HALL TICKET-CUM-IDENTITY SHEET

DATE	TIME	NAME OF THE EXAMINATION CENTER
14/9/25	2:30pm-4pm	Govt. Junior College, opp: Govt. Area Hospital Mulugu
NAME AND FULL POSTAL ADDRESS OF THE CANDIDATE		
(to be filled by the Candidate)		
shyamani Nares, s/o Venkataiah H.No: 1-921A, Brahmanpally Madhavapur Mandal of J.S. Bhupalpally		
Signature of the Candidate		 Principal GOVT. DEGREE COLLEGE MAHADEVPUR-505 504 RAYASHANKAR BHUPALPALLY

SECRETARY
DISTRICT LEGAL SERVICES AUTHORITY,
Mulugu

DUPLICATE

DISTRICT LEGAL SERVICES AUTHORITY: Mulugu
WRITTEN TEST FOR THE POST OF Record Assistant
HALL TICKET-CUM-IDENTITY SHEET

24170718

DATE	TIME	NAME OF THE EXAMINATION CENTER
14/9/25	2:30pm-4pm	(to be filled by the Candidate) Govt. Junior College, opp: Govt. Area Hospital Mulugu
NAME AND FULL POSTAL ADDRESS OF THE CANDIDATE		
(to be filled by the Candidate)		
shyamani Nares, s/o Venkataiah H.No: 1-921A, Brahmanpally Madhavapur Mandal, J.S. Bhupalpally		
Signature of the Candidate		 Principal GOVT. DEGREE COLLEGE MAHADEVPUR-505 504 RAYASHANKAR BHUPALPALLY

SECRETARY
DISTRICT LEGAL SERVICES AUTHORITY,

ORIGINAL

REGD. No.: 24170719

DISTRICT LEGAL SERVICES AUTHORITY : MULUGU WRITTEN TEST FOR THE POST OF RECORD ASSISTANT HALL TICKET-CUM-IDENTITY SHEET

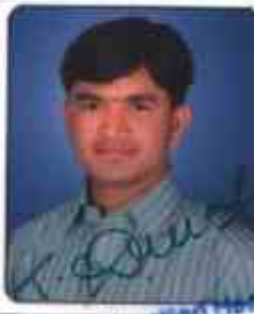
DATE	TIME	NAME OF THE EXAMINATION CENTER
14/9/25	2:30 pm - 4 pm	Govt. Junior College, opp. Govt. Area Hospital mulugu
NAME AND FULL POSTAL ADDRESS OF THE CANDIDATE		
KUMAR PADIA, (to be filled by the Candidate) S/o VALU NAIK H.NO: 1-470/G PRAGATHI COLONY, MULUGU, MDL DIST: MULUGU, TELANGANA, PIN: 506343, Phone: 9912327170.		
Signature of the Candidate		 T. S. Venkatapur(M) Dist: Mulugu

SECRETARY
DISTRICT LEGAL SERVICES AUTHORITY,
MULUGU

DUPLICATE

DISTRICT LEGAL SERVICES AUTHORITY : MULUGU WRITTEN TEST FOR THE POST OF RECORD ASSISTANT

HALL TICKET-CUM-IDENTITY SHEET 24170719

DATE	TIME	NAME OF THE EXAMINATION CENTER
15/12/2024	10:30 AM	(to be filled by the Candidate) DISTRICT COURT COMPLEX, MULUGU.
14/9/25	2:30 pm - 4 pm	Govt. Junior College mulugu
NAME AND FULL POSTAL ADDRESS OF THE CANDIDATE		
(to be filled by the Candidate) KUMAR PADIA S/o VALU NAIK, H.No: 1-470/G, PRAGATHI COLONY, MULUGU, MDL DIST: MULUGU, TELANGANA, Pin: 506343, Phone: 9912327170.		
Signature of the Candidate		 T. S. Venkatapur(M) Dist: Mulugu

SECRETARY
DISTRICT LEGAL SERVICES AUTHORITY,
MULUGU.

ORIGINAL

REGD. No.: 24170720

DISTRICT LEGAL SERVICES AUTHORITY : MULUGU WRITTEN TEST FOR THE POST OF Record Assistant HALL TICKET-CUM-IDENTITY SHEET

DATE	TIME	NAME OF THE EXAMINATION CENTER
14/9/25	2:30pm-4pm	Govt. Junior College opp: Govt. Area Hospital mulugu
NAME AND FULL POSTAL ADDRESS OF THE CANDIDATE		
(to be filled by the Candidate)		
SURABOTNA Lokesh kumar H.No: 8-2-37 B-k Bazar Khammam 507001 Telangana		
S. Lokesh kumar Signature of the Candidate		 R. PRAVEEN Asst. Prof. of Physics Govt. Degree College (Women's) KHAMMAM.

SECRETARY
DISTRICT LEGAL SERVICES AUTHORITY,
MULUGU

DUPLICATE

DISTRICT LEGAL SERVICES AUTHORITY : MULUGU WRITTEN TEST FOR THE POST OF Record Assistant

HALL TICKET-CUM-IDENTITY SHEET 24170720

DATE	TIME	NAME OF THE EXAMINATION CENTER
14/9/25	2:30pm-4pm	(to be filled by the Candidate) Govt. Junior College, opp: Govt. Area Hospital mulugu
NAME AND FULL POSTAL ADDRESS OF THE CANDIDATE		
(to be filled by the Candidate)		
SURABOTNA Lokesh kumar H.No: 8-2-37 B-k Bazar Khammam 507001 Telangana		
S. Lokesh kumar Signature of the Candidate		 R. PRAVEEN Asst. Prof. of Physics Govt. Degree College (Women's) KHAMMAM.

SECRETARY
DISTRICT LEGAL SERVICES AUTHORITY,
MULUGU.

ORIGINAL

REGD. No.: 24170721

DISTRICT LEGAL SERVICES AUTHORITY MULUGU UNIT
 WRITTEN TEST FOR THE POST OF Record Assistant
 HALL TICKET-CUM-IDENTITY SHEET

DATE	TIME	NAME OF THE EXAMINATION CENTER
14/9/25	2:30pm-4pm	Govt. Junior College, opp: Govt. Area Hospital mulugu
NAME AND FULL POSTAL ADDRESS OF THE CANDIDATE (to be filled by the Candidate)		
Bommagani, Navyasri, P. Ramesh H.NO: 1-6-95/9/1/A, Jublipura, Road no.4, Khammam, Telangana state-507003 M.NO-9505441852		
B. Navyasri Signature of the Candidate		 B. SRINIVASA RAO M.Sc., M.A., SET, D.Ed. Lecturer in English Govt. Polytechnic, Madhira

SECRETARY
 DISTRICT LEGAL SERVICES AUTHORITY,
Mulugu unit

DUPLICATE

DISTRICT LEGAL SERVICES AUTHORITY: Mulugu unit
 WRITTEN TEST FOR THE POST OF Record Assistant
 HALL TICKET-CUM-IDENTITY SHEET

DATE	TIME	NAME OF THE EXAMINATION CENTER
14/9/25	2:30pm-4pm	(to be filled by the Candidate) Govt. Junior College, opp: Govt. Area Hospital mulugu
NAME AND FULL POSTAL ADDRESS OF THE CANDIDATE (to be filled by the Candidate)		
Bommagani, Navyasri, P. Ramesh H.NO: 1-6-95/9/1/A, Jublipura, Road no.4 Khammam, Telangana state -507003 M.NO-9505441852		
B. Navyasri Signature of the Candidate		 B. SRINIVASA RAO M.Sc., M.A., SET, D.Ed. Lecturer in English Govt. Polytechnic, Madhira

SECRETARY
 DISTRICT LEGAL SERVICES AUTHORITY,
Mulugu unit

ORIGINAL

REGD. No.: 24170722

DISTRICT LEGAL SERVICES AUTHORITY: MULUGU
WRITTEN TEST FOR THE POST OF Record Assistant
HALL TICKET-CUM-IDENTITY SHEET

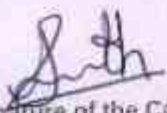
DATE	TIME	NAME OF THE EXAMINATION CENTER
14/9/25	2:30pm-4pm	Govt. Junior College Opp: Govt. Area Hospital Mulugu
NAME AND FULL POSTAL ADDRESS OF THE CANDIDATE (to be filled by the Candidate)		
ALLADI. SRIKANTH S/o. A. MANOHAR HOUSE No. 3-3-124. YENUGULAGADDA. HANAMKONDA 506011		
Signature of the Candidate 		 Civil Surgeon M.G.M. HOSPITAL WAPIDANGAL

SECRETARY
DISTRICT LEGAL SERVICES AUTHORITY,
MULUGU

DUPLICATE

DISTRICT LEGAL SERVICES AUTHORITY: MULUGU
WRITTEN TEST FOR THE POST OF Record Assistant

HALL TICKET-CUM-IDENTITY SHEET 24170722

DATE	TIME	NAME OF THE EXAMINATION CENTER
14/9/25	2:30pm-4pm	(to be filled by the Candidate) Govt. Junior College Opp: Govt. Area Hospital Mulugu
NAME AND FULL POSTAL ADDRESS OF THE CANDIDATE (to be filled by the Candidate)		
ALLADI. SRIKANTH S/o. A. MANOHAR HOUSE No. 3-3-124. YENUGULAGADDA. HANAMKONDA 506011		
Signature of the Candidate 		 Civil Surgeon M.G.M. HOSPITAL WAPIDANGAL

SECRETARY
DISTRICT LEGAL SERVICES AUTHORITY,
MULUGU.

ORIGINAL

REGD. No.: 24170723

DISTRICT LEGAL SERVICES AUTHORITY: mulugu
 WRITTEN TEST FOR THE POST OF Record Assistant
 HALL TICKET-CUM-IDENTITY SHEET

DATE	TIME	NAME OF THE EXAMINATION CENTER
14/9/25	2:30pm-4pm	Govt. Junior College, opp: Govt. Area Hospital mulugu
NAME AND FULL POSTAL ADDRESS OF THE CANDIDATE		
(to be filled by the Candidate)		
ALURI ALEKHYA H.No: 1-42/12, Gollapadu khammam rural Telagana-507003		
A. Alekhyas Signature of the Candidate		

SECRETARY
 DISTRICT LEGAL SERVICES AUTHORITY,

DUPLICATE

DISTRICT LEGAL SERVICES AUTHORITY: mulugu
 WRITTEN TEST FOR THE POST OF Record Assistant
 HALL TICKET-CUM-IDENTITY SHEET

DATE	TIME	NAME OF THE EXAMINATION CENTER
14/9/25	2:30pm-4pm	(to be filled by the Candidate) Govt. Junior College, opp: Govt. Area Hospital mulugu
NAME AND FULL POSTAL ADDRESS OF THE CANDIDATE		
(to be filled by the Candidate)		
ALURI ALEKHYA H.No: 1-42/12, Gollapadu, Khammam rural Telagana -507003		
A. Alekhyas Signature of the Candidate		

SECRETARY
 DISTRICT LEGAL SERVICES AUTHORITY,

ORIGINAL

REGD. No.: 24170724

DISTRICT LEGAL SERVICES AUTHORITY: MULUGU
FOR THE POST OF Recess Assistant WRITTEN TEST
HALL TICKET-CUM-IDENTITY SHEET

DATE	TIME	NAME OF THE EXAMINATION CENTER
14/9/25	2:30pm-4pm	Govt. Junior College, opp: Govt. Area Hospital Mulugu
NAME AND FULL POSTAL ADDRESS OF THE CANDIDATE (to be filled by the Candidate)		
H.No:-8-14/2, Vanga Seetharamaiah Gari Veedhi, V.H. Banjar, Penubally (Md), Khammam - 507302.		
V. Chandana Signature of the Candidate		 N. SRINIVASA RAO M.Sc. Ed., Ph.D. Asst. Prof. in Physics Govt. Degree College Nelakondapally, Khammam (Dt).

SECRETARY
DISTRICT LEGAL SERVICES AUTHORITY,
MULUGU

DUPLICATE

DISTRICT LEGAL SERVICES AUTHORITY: MULUGU
WRITTEN TEST FOR THE POST OF Recess Assistant
HALL TICKET-CUM-IDENTITY SHEET

24170724

DATE	TIME	NAME OF THE EXAMINATION CENTER
14/9/25	2:30pm-4pm	(to be filled by the Candidate) Govt. Junior College, opp: Govt. Area Hospital Mulugu
NAME AND FULL POSTAL ADDRESS OF THE CANDIDATE (to be filled by the Candidate)		
H.No:-8-14/2, Vanga Seetharamaiah Gari Veedhi, V.H. Banjar, Penubally (Md), Khammam - 507302		
V. Chandana Signature of the Candidate		 Dr. N. SRINIVASA RAO M.Sc. Ed., Ph.D. Asst. Prof. in Physics Govt. Degree College Nelakondapally, Khammam (Dt).

SECRETARY
DISTRICT LEGAL SERVICES AUTHORITY,
MULUGU

ORIGINAL

REGD. No.: 24170725

DISTRICT LEGAL SERVICES AUTHORITY : MULUGU
WRITTEN TEST FOR THE POST OF Record Assistant
HALL TICKET-CUM-IDENTITY SHEET

DATE	TIME	NAME OF THE EXAMINATION CENTER
14/9/25	2:30 pm - 4 pm	Govt. Junior College, opp. Govt. Area Hospital Mulugu
NAME AND FULL POSTAL ADDRESS OF THE CANDIDATE		
(to be filled by the Candidate)		
Krishna Sagar. Pozika. St. Ganesh Lal Vijayadharanpally (nd) Mulugu 506343 (nd) 7702064456		
Signature of the Candidate		 Medical Officer PHC NALLABELLY Dist. WARANGAL

SECRETARY
DISTRICT LEGAL SERVICES AUTHORITY,
MULUGU

DUPLICATE

DISTRICT LEGAL SERVICES AUTHORITY : MULUGU
WRITTEN TEST FOR THE POST OF Record Assistant
HALL TICKET-CUM-IDENTITY SHEET 24170725

DATE	TIME	NAME OF THE EXAMINATION CENTER
14/9/25	2:30 pm - 4 pm	(to be filled by the Candidate) Govt. Junior College, opp. Govt. Area Hospital Mulugu
NAME AND FULL POSTAL ADDRESS OF THE CANDIDATE		
(to be filled by the Candidate)		
Krishna Sagar. Pozika. St. Ganesh Lal Vijayadharanpally (nd) Mulugu 506343 (nd) 7702064456		
Signature of the Candidate		 Medical Officer PHC NALLABELLY Dist. WARANGAL

SECRETARY
DISTRICT LEGAL SERVICES AUTHORITY,
MULUGU.

ORIGINAL

REGD. No.: 24170726

DISTRICT LEGAL SERVICES AUTHORITY - MULUGU
WRITTEN TEST FOR THE POST OF Record Assistant
HALL TICKET-CUM-IDENTITY SHEET

DATE	TIME	NAME OF THE EXAMINATION CENTER
14/9/25	2:30pm-4pm	Gort. Junior College opp: Gort. Area Hospital mulugu
NAME AND FULL POSTAL ADDRESS OF THE CANDIDATE (to be filled by the Candidate)		
AZMIRA ARAVIND NAIK 35-7-47, Maruthi colony, Gopalpur, Hanamkonda 506370		
Signature of the Candidate		 B. Anand

SECRETARY
DISTRICT LEGAL SERVICES AUTHORITY,
MULUGU

DUPLICATE

DISTRICT LEGAL SERVICES AUTHORITY - MULUGU
WRITTEN TEST FOR THE POST OF Record Assistant

HALL TICKET-CUM-IDENTITY SHEET 24170726

DATE	TIME	NAME OF THE EXAMINATION CENTER
14/9/25	2:30pm-4pm	Gort. Junior College opp: Gort. Area Hospital mulugu
NAME AND FULL POSTAL ADDRESS OF THE CANDIDATE (to be filled by the Candidate)		
AZMIRA ARAVIND NAIK 35-7-47, Maruthi colony, Gopalpur, Hanamkonda 506370.		
Signature of the Candidate		 B. Anand

SECRETARY
DISTRICT LEGAL SERVICES AUTHORITY,
MULUGU

ORIGINAL

REGD. No.: 24170727

DISTRICT LEGAL SERVICES AUTHORITY : MULUGU
WRITTEN TEST FOR THE POST OF Record Assistant
HALL TICKET-CUM-IDENTITY SHEET

DATE	TIME	NAME OF THE EXAMINATION CENTER
14/9/25	2:30pm-4pm	Govt Junior College opp: Govt Area Hospital Mulugu
NAME AND FULL POSTAL ADDRESS OF THE CANDIDATE		
(to be filled by the Candidate)		
Mood. Sanjeev Kumar s/o Mood. Mothilal H: No: 12-56, vii Rangaraopally Mulugu Dist. Mulugu pincode: 506343.		
Signature of the Candidate		M. Sanjeev Kumar



Surgeon
BELL
ANGAL

Dist

SECRETARY
DISTRICT LEGAL SERVICES AUTHORITY,
MULUGU

DUPLICATE

DISTRICT LEGAL SERVICES AUTHORITY : MULUGU
WRITTEN TEST FOR THE POST OF Record Assistant

HALL TICKET-CUM-IDENTITY SHEET 24170727

DATE	TIME	NAME OF THE EXAMINATION CENTER
14/9/25	2:30pm-4pm	(to be filled by the Candidate) Govt Junior College opp: Govt Area Hospital Mulugu
NAME AND FULL POSTAL ADDRESS OF THE CANDIDATE		
(to be filled by the Candidate)		
Mood. Sanjeev Kumar s/o Mood. Mothilal H: No: 12-56 (vi) Rangaraopally Mulugu Dist. Mulugu pincode: 506343.		
Signature of the Candidate		M. Sanjeev Kumar



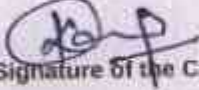
Surgeon
BELL
ANGAL

SECRETARY
DISTRICT LEGAL SERVICES AUTHORITY,
MULUGU

ORIGINAL

REGD. No.: 24170728

DISTRICT LEGAL SERVICES AUTHORITY : MULUGU
 WRITTEN TEST FOR THE POST OF Record Assistant
 HALL TICKET-CUM-IDENTITY SHEET

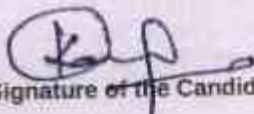
DATE	TIME	NAME OF THE EXAMINATION CENTER
14/9/25	2.30pm-4pm	Govt. Junior College opp: Govt. Area Hospital Mulugu
NAME AND FULL POSTAL ADDRESS OF THE CANDIDATE (to be filled by the Candidate) <u>porika Kalyani</u> H.NO-2-32, VIL-PATHIPALLY, MANDAL/DST- MULUGU PIN-506352		
 Signature of the Candidate		 Medical Officer NALLABELLY B. VARANSAI

SECRETARY
 DISTRICT LEGAL SERVICES AUTHORITY,
 MULUGU

DUPLICATE

DISTRICT LEGAL SERVICES AUTHORITY : MULUGU
 WRITTEN TEST FOR THE POST OF Record Assistant

HALL TICKET-CUM-IDENTITY SHEET 24170728

DATE	TIME	NAME OF THE EXAMINATION CENTER
14/9/25	2:30pm-4pm	(to be filled by the Candidate) Govt. Junior College opp: Govt. Area Hospital Mulugu
NAME AND FULL POSTAL ADDRESS OF THE CANDIDATE (to be filled by the Candidate) H.NO-2-32, VIL-PATHIPALLY MANDAL/DST- MULUGU PIN-506352		
 Signature of the Candidate		 Medical Officer NALLABELLY B. VARANSAI

SECRETARY
 DISTRICT LEGAL SERVICES AUTHORITY,
 MULUGU.

ORIGINAL

REGD. No.: 24170729

DISTRICT LEGAL SERVICES AUTHORITY : Mulugu WRITTEN TEST
FOR THE POST OF Record Assistant
HALL TICKET-CUM-IDENTITY SHEET

DATE	TIME	NAME OF THE EXAMINATION CENTER
14/9/25	2:30pm-4pm	Govt. Junior College, opp. Govt. Area Hospital Mulugu
NAME AND FULL POSTAL ADDRESS OF THE CANDIDATE		
K. Mahesh (to be filled by the Candidate)		
H.No-3-71, Kusumanchi(V), Kusumanchi(M), Khammam (N) 504159, Telangana		
K. Mahesh Signature of the Candidate		 Govt. Junior College Kusumanchi, Khammam

SECRETARY
DISTRICT LEGAL SERVICES AUTHORITY,
Mulugu

DUPLICATE

DISTRICT LEGAL SERVICES AUTHORITY : Khammam
WRITTEN TEST FOR THE POST OF Record Assistant
HALL TICKET-CUM-IDENTITY SHEET 24170729

DATE	TIME	NAME OF THE EXAMINATION CENTER
14/9/25	2:30pm-4pm	(to be filled by the Candidate) Govt. Junior College opp. Govt. Area Hospital Mulugu
NAME AND FULL POSTAL ADDRESS OF THE CANDIDATE		
(to be filled by the Candidate)		
H.No-3-71, Kusumanchi(V), Kusumanchi(M), Khammam(N) 504159, Telangana.		
K. Mahesh Signature of the Candidate		 Govt. Junior College Kusumanchi, Khammam

SECRETARY
DISTRICT LEGAL SERVICES AUTHORITY,
Mulugu

ORIGINAL

REGD. No.: 24170730

DISTRICT LEGAL SERVICES AUTHORITY : MULUGU
WRITTEN TEST FOR THE POST OF RECORD ASSISTANT
HALL TICKET-CUM-IDENTITY SHEET

DATE	TIME	NAME OF THE EXAMINATION CENTER
14/9/25	2:30pm-4pm	Govt. Junior College opp. Govt. Area Hospital Mulugu
NAME AND FULL POSTAL ADDRESS OF THE CANDIDATE		
(to be filled by the Candidate)		
BODA. LINGASWAMY 13-10-52/A Sri Krishna Residency, New gaddiannaram colony, Dilsubnagar, Hyderabad 500060. PH. NO.: 9966499630		
B. Lingaswamy Signature of the Candidate		 B. SRIDHAR Regd. No: 11159 Assistant Neuro Surgeon Nizam's Institute of Medical Sciences Panjagutta, Hyd.

SECRETARY
DISTRICT LEGAL SERVICES AUTHORITY,
MULUGU

DUPLICATE

DISTRICT LEGAL SERVICES AUTHORITY : MULUGU
WRITTEN TEST FOR THE POST OF RECORD ASSISTANT

HALL TICKET-CUM-IDENTITY SHEET 24170730

DATE	TIME	NAME OF THE EXAMINATION CENTER
14/9/25	2:30pm-4pm	(to be filled by the Candidate) Govt. Junior College opp. Govt. Area Hospital Mulugu
NAME AND FULL POSTAL ADDRESS OF THE CANDIDATE		
(to be filled by the Candidate)		
BODA. LINGASWAMY 13-10-52/A Sri Krishna Residency, New gaddiannaram colony, Dilsubnagar, Hyderabad 500060. PH. NO.: 9966499630		
B. Lingaswamy Signature of the Candidate		 B. SRIDHAR Regd. No: 11159 Assistant Neuro Surgeon Nizam's Institute of Medical Sciences Panjagutta, Hyd.

SECRETARY
DISTRICT LEGAL SERVICES AUTHORITY,
MULUGU

ORIGINAL

REGD. No.: 24170731

DISTRICT LEGAL SERVICES AUTHORITY : MULUGU
WRITTEN TEST FOR THE POST OF RECORD ASSISTANT
HALL TICKET-CUM-IDENTITY SHEET

DATE	TIME	NAME OF THE EXAMINATION CENTER
14/9/25	2:30pm-4pm	Govt. Junior College, opp. Govt. Area Hospital Mulugu
NAME AND FULL POSTAL ADDRESS OF THE CANDIDATE		
(to be filled by the Candidate)		
Payyavula. Gopi Kishor S/venkateswar Rao (village post) Rajupet (mandal) mangapur (Dist) mulugu Pincode: 506122 Mdi:		
Signature of the Candidate		P. Gopi Kishor



SECRETARY
DISTRICT LEGAL SERVICES AUTHORITY,
MULUGU

DUPLICATE

DISTRICT LEGAL SERVICES AUTHORITY : MULUGU
WRITTEN TEST FOR THE POST OF RECORD ASSISTANT

HALL TICKET-CUM-IDENTITY SHEET 24170731

DATE	TIME	NAME OF THE EXAMINATION CENTER
14/9/25	2:30pm-4pm	Govt. Junior College, opp. Govt. Area Hospital Mulugu
NAME AND FULL POSTAL ADDRESS OF THE CANDIDATE		
(to be filled by the Candidate)		
Payyavula. Gopi Kishor S/venkateswar Rao (village post) Rajupet (mandal) mangapur (Dist) mulugu Pincode: 506122 Mdi:		
Signature of the Candidate		P. Gopi Kishor



SECRETARY
DISTRICT LEGAL SERVICES AUTHORITY,
MULUGU.

ORIGINAL

REGD. No.: 24170732

DISTRICT LEGAL SERVICES AUTHORITY : MULUGU
WRITTEN TEST FOR THE POST OF Record Assistant
HALL TICKET-CUM-IDENTITY SHEET

DATE	TIME	NAME OF THE EXAMINATION CENTER
14/9/25	2:30pm-4pm	Gort. Junior College, opp. Gort. Area Hospital mulugu
NAME AND FULL POSTAL ADDRESS OF THE CANDIDATE		
(to be filled by the Candidate)		
KAMEA. ASHWINI. Vill: Sringeri. Dist: Mulugu. Dist: Mulugu. H. no: 3-32. postal codes: Near Mallampally.		
K. Ashwini, Signature of the Candidate		 Medical Officer PHC NALLABELLY Dist: WARANGAL

SECRETARY
DISTRICT LEGAL SERVICES AUTHORITY,
MULUGU

DUPLICATE

DISTRICT LEGAL SERVICES AUTHORITY : MULUGU
WRITTEN TEST FOR THE POST OF Record Assistant

HALL TICKET-CUM-IDENTITY SHEET 24170732

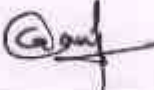
DATE	TIME	NAME OF THE EXAMINATION CENTER
14/9/25	2:30pm-4pm	(to be filled by the Candidate) Gort. Junior College, opp. Gort. Area Hospital mulugu
NAME AND FULL POSTAL ADDRESS OF THE CANDIDATE		
(to be filled by the Candidate)		
KAMEA. ASHWINI. Vill: Sringeri. Dist: Mulugu. Dist: Mulugu. H. no: 3-32. postal codes: Near Mallampally.		
K. Ashwini, Signature of the Candidate		 Medical Officer PHC NALLABELLY Dist: WARANGAL

SECRETARY
DISTRICT LEGAL SERVICES AUTHORITY,
MULUGU.

ORIGINAL

REGD. No.: 24170733

DISTRICT LEGAL SERVICES AUTHORITY - MULUGU
 WRITTEN TEST FOR THE POST OF Record Assistant
 HALL TICKET-CUM-IDENTITY SHEET

DATE	TIME	NAME OF THE EXAMINATION CENTER
14/9/25	2:30 pm - 4 pm	Gort. Junior College opp: Gort. Area Hospital mulugu
NAME AND FULL POSTAL ADDRESS OF THE CANDIDATE (to be filled by the Candidate)		
H.No - 5-135, vill - Lannidevipet, mdl - Venkatarang Dist - mulugu. pin code - 506345.		
Signature of the Candidate		



SECRETARY
 DISTRICT LEGAL SERVICES AUTHORITY,
 MULUGU

DUPLICATE

DISTRICT LEGAL SERVICES AUTHORITY : MULUGU
 WRITTEN TEST FOR THE POST OF Record Assistant

HALL TICKET-CUM-IDENTITY SHEET 24170733

DATE	TIME	NAME OF THE EXAMINATION CENTER
14/9/25	2:30 pm - 4 pm	(to be filled by the Candidate) Gort. Junior College opp: Gort. Area Hospital mulugu
NAME AND FULL POSTAL ADDRESS OF THE CANDIDATE (to be filled by the Candidate)		
H.No. 5-135, vill - Lannidevipet, mdl - Venkatarang Dist - mulugu. pincode - 506345		
Signature of the Candidate		



SECRETARY
 DISTRICT LEGAL SERVICES AUTHORITY,
 MULUGU.

ORIGINAL

REGD. No.: 24170734

DISTRICT LEGAL SERVICES AUTHORITY, MULUGU
WRITTEN TEST FOR THE POST OF Record Assistant
HALL TICKET-CUM-IDENTITY SHEET

DATE	TIME	NAME OF THE EXAMINATION CENTER
14/9/25	2:30pm-4pm	Govt. Junior College, opp: Govt. Area Hospital mulugu
NAME AND FULL POSTAL ADDRESS OF THE CANDIDATE		
(to be filled by the Candidate)		
House Number: 1-67/1, Jagganna Pet (village)		
Mandal: Mulugu, District: Mulugu		
Pin code: 506 343		
vijender M Signature of the Candidate		 Medical Officer PHC NALLABELLY Dist WARANGAL

SECRETARY
DISTRICT LEGAL SERVICES AUTHORITY,
MULUGU

DUPLICATE

DISTRICT LEGAL SERVICES AUTHORITY, MULUGU
WRITTEN TEST FOR THE POST OF Record Assistant

HALL TICKET-CUM-IDENTITY SHEET 24170734

DATE	TIME	NAME OF THE EXAMINATION CENTER
14/9/25	2:30pm-4pm	(to be filled by the Candidate) Govt. Junior College, opp: Govt. Area Hospital mulugu
NAME AND FULL POSTAL ADDRESS OF THE CANDIDATE		
(to be filled by the Candidate)		
H-No:- 1-67/1, village:- Jagganna Pet		
Mandal: Mulugu, District: Mulugu		
Pin code: 506 343		
vijender M Signature of the Candidate		 Medical Officer PHC NALLABELLY Dist WARANGAL

SECRETARY
DISTRICT LEGAL SERVICES AUTHORITY,
MULUGU

ORIGINAL

REGD. No.:

24170735

DISTRICT LEGAL SERVICES AUTHORITY : MULUGU
WRITTEN TEST FOR THE POST OF RECORD ASSISTANT
HALL TICKET-CUM-IDENTITY SHEET

DATE	TIME	NAME OF THE EXAMINATION CENTRE
14/9/25	2:30pm-4pm	Govt Junior College opp: Govt Area Hospital Mulugu
NAME AND FULL POSTAL ADDRESS OF THE CANDIDATE (to be filled by the Candidate)		
KORNIBELLY VENKATESH 5-18/A, KAMARAM(V), TADVAI MULUGU(D). PIN CODE: 506344		
Signature of the Candidate		K. Venkatesh



Senior Analytical Officer,
Intelligence & Security Wing,
Telangana State, Hyderabad-82.

SECRETARY

DISTRICT LEGAL SERVICES AUTHORITY,
MULUGU

DUPLICATE

DISTRICT LEGAL SERVICES AUTHORITY : MULUGU
WRITTEN TEST FOR THE POST OF RECORD ASSISTANT

HALL TICKET-CUM-IDENTITY SHEET

24170735

DATE	TIME	NAME OF THE EXAMINATION CENTRE
14/9/25	2:30pm-4pm	Govt Junior College opp: Govt Area Hospital Mulugu
NAME AND FULL POSTAL ADDRESS OF THE CANDIDATE (to be filled by the Candidate)		
KORNIBELLY VENKATESH 5-18/A, KAMARAM(V), TADVAI(M) MULUGU(D). PIN CODE: 506344		
Signature of the Candidate		K. Venkatesh



Senior Analytical Officer,
Intelligence & Security Wing,
Telangana State, Hyderabad-82.

SECRETARY

DISTRICT LEGAL SERVICES AUTHORITY,
MULUGU.

ORIGINAL

REGD. No.: 24170736

DISTRICT LEGAL SERVICES AUTHORITY : MULUGU
WRITTEN TEST FOR THE POST OF RECORD ASSISTANT
HALL TICKET-CUM-IDENTITY SHEET

DATE	TIME	NAME OF THE EXAMINATION CENTER
14/9/25	2:30pm-4pm	Govt. Junior College, opp: Govt. Area Hospital Mulugu
NAME AND FULL POSTAL ADDRESS OF THE CANDIDATE		
(to be filled by the Candidate)		
TEEGALA SWADESH MAHAJAN H: No: 20-3-103, WEST FORT, FORT WARANGAL, WARANGAL, TELANGANA. (506002)		
T. Swadesh Signature of the Candidate		 Junior Lecturer Govt. Junior College Mulugu 20/11/24

SECRETARY
DISTRICT LEGAL SERVICES AUTHORITY,
MULUGU

DUPLICATE

DISTRICT LEGAL SERVICES AUTHORITY : MULUGU
WRITTEN TEST FOR THE POST OF RECORD ASSISTANT

HALL TICKET-CUM-IDENTITY SHEET 24170736

DATE	TIME	NAME OF THE EXAMINATION CENTER
14/9/25	2:30pm-4pm	(to be filled by the Candidate) Govt. Junior College, opp: Govt. Area Hospital Mulugu
NAME AND FULL POSTAL ADDRESS OF THE CANDIDATE		
(to be filled by the Candidate)		
TEEGALA SWADESH MAHAJAN H: No: 20-3-103, WEST FORT, FORT WARANGAL, WARANGAL, TELANGANA. (506002)		
T. Swadesh Signature of the Candidate		 Junior Lecturer Govt. Junior College Fort Warangal, Warangal Dist 20/11/24

SECRETARY
DISTRICT LEGAL SERVICES AUTHORITY,
MULUGU.

ORIGINAL

REGD. No.: 24170737

DISTRICT LEGAL SERVICES AUTHORITY : MULUGU
WRITTEN TEST FOR THE POST OF RECORD ASSISTANT
HALL TICKET-CUM-IDENTITY SHEET

DATE	TIME	NAME OF THE EXAMINATION CENTER
14/9/25	2:30-4pm	Govt. Junior College, opp: Govt. Area Hospital mulugu
NAME AND FULL POSTAL ADDRESS OF THE CANDIDATE (to be filled by the Candidate)		
Ande Gopi Krishna S/o. Venkateshwar Rao R/o. 9-1A9, Warangal Road, Huzurabad		
Signature of the Candidate <i>Gopi Krishna</i>		

SECRETARY
DISTRICT LEGAL SERVICES AUTHORITY,
MULUGU

DUPLICATE

DISTRICT LEGAL SERVICES AUTHORITY : MULUGU
WRITTEN TEST FOR THE POST OF RECORD ASSISTANT

HALL TICKET-CUM-IDENTITY SHEET

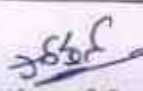
DATE	TIME	NAME OF THE EXAMINATION CENTER
~~15/12/2024~~ 14/9/25	~~10:30 AM~~ 2:30pm-4pm	~~District Court Complex~~ Govt. Jr. College, opp: Govt. Area Hospital mulugu
NAME AND FULL POSTAL ADDRESS OF THE CANDIDATE (to be filled by the Candidate)		
Ande Gopi Krishna S/o. Ande - Venkateshwar Rao, R/o. 9-1A9 Warangal Road, HUZURABAD.		
Signature of the Candidate <i>Gopi Krishna</i>		

SECRETARY
DISTRICT LEGAL SERVICES AUTHORITY,
MULUGU.

ORIGINAL

REGD. No.: 24170738

DISTRICT LEGAL SERVICES AUTHORITY : MULUGU
WRITTEN TEST FOR THE POST OF Record Assistant
HALL TICKET-CUM-IDENTITY SHEET

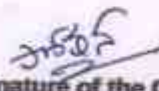
DATE	TIME	NAME OF THE EXAMINATION CENTER
14/9/25	2:30pm-4pm	Govt. Junior College, opp: Govt. Area Hospital Mulugu
NAME AND FULL POSTAL ADDRESS OF THE CANDIDATE		
(to be filled by the Candidate) Balugu Pothana, H. No. 3-72 Post: Bandarpally, Dist: Mulugu 506343		
Signature of the Candidate 		 S. CHANDRAIAH Assistant Government Pleader Junior civil Judge Court Mulugu. Cell: 8897710169

SECRETARY
DISTRICT LEGAL SERVICES AUTHORITY,
MULUGU

DUPLICATE

DISTRICT LEGAL SERVICES AUTHORITY : MULUGU
WRITTEN TEST FOR THE POST OF Record Assistant

HALL TICKET-CUM-IDENTITY SHEET 24170738

DATE	TIME	NAME OF THE EXAMINATION CENTER
14/9/25	2:30pm-4pm	(to be filled by the Candidate) Govt. Junior College, opp: Govt. Area Hospital Mulugu
NAME AND FULL POSTAL ADDRESS OF THE CANDIDATE		
(to be filled by the Candidate) Balugu Pothana, H. No. 3-72 Post: Bandarpally, Dist: Mulugu 506343		
Signature of the Candidate 		 S. CHANDRAIAH Assistant Government Pleader Junior civil Judge Court Mulugu. Cell: 8897710169

SECRETARY
DISTRICT LEGAL SERVICES AUTHORITY,
MULUGU.

ORIGINAL

REGD. No.: 24170739

DISTRICT LEGAL SERVICES AUTHORITY : MULUGU
WRITTEN TEST FOR THE POST OF RECORD ASSISTANT
HALL TICKET-CUM-IDENTITY SHEET

DATE	TIME	NAME OF THE EXAMINATION CENTER
~~14/9/24~~ 14/9/25	~~10:30 A.M.~~ 2:30pm - 4pm	~~District Court Complex, Mulugu~~ Govt. Junior College, opp. Govt. Area Hospital, mulugu
NAME AND FULL POSTAL ADDRESS OF THE CANDIDATE		
(to be filled by the Candidate)		
B. Satheesh, 810 Yellalaha Ho. No. 5-100, Gavichegala (V), Sengam (M), Kachanad B.H. P.O. 506310. Cell No. 8367252730.		
B. Satheesh Signature of the Candidate		 Administrative Officer for SPE & ACB Addl. District and Sessions Judge, Warangal

SECRETARY
DISTRICT LEGAL SERVICES AUTHORITY,
MULUGU

DUPLICATE

DISTRICT LEGAL SERVICES AUTHORITY : MULUGU
WRITTEN TEST FOR THE POST OF RECORD ASSISTANT

HALL TICKET-CUM-IDENTITY SHEET

DATE	TIME	NAME OF THE EXAMINATION CENTER
~~14/9/24~~ 14/9/25	~~10:30 A.M.~~ 2:30pm - 4pm	~~District Court Complex, Mulugu~~ Govt. Junior College, opp. Govt. Area Hospital, mulugu
NAME AND FULL POSTAL ADDRESS OF THE CANDIDATE		
(to be filled by the Candidate)		
B. Satheesh, 810 Yellalaha Ho. H.No. 5-100, Gavichegala (V), Sengam (M), Warangal Dist. P.O. 506310. Cell No. 8367252730.		
B. Satheesh Signature of the Candidate		 Administrative Officer for SPE & ACB Addl. District and Judge, Warangal

SECRETARY
DISTRICT LEGAL SERVICES AUTHORITY,
MULUGU.

ORIGINAL

REGD. No.: 24170740

DISTRICT LEGAL SERVICES AUTHORITY : MULUGU
WRITTEN TEST FOR THE POST OF Record Assistant
HALL TICKET-CUM-IDENTITY SHEET

DATE	TIME	NAME OF THE EXAMINATION CENTER
14/9/25	2:30pm-4pm	Gort. Junior College opp: Gort. Area Hospital Mulugu
NAME AND FULL POSTAL ADDRESS OF THE CANDIDATE		
(to be filled by the Candidate)		
Balugu Thejaswi w/o Kannabhasan H.No: 3-67/2 Post: Bandas pally Mall: 2 Dist: Mulugu 506343		
B. Thejaswi Signature of the Candidate		 B. CHANDANAI Assistant Government Pleader Junior civil Judge Court Mulugu, Cell: 889710169

SECRETARY
DISTRICT LEGAL SERVICES AUTHORITY,
MULUGU

DUPLICATE

DISTRICT LEGAL SERVICES AUTHORITY : MULUGU
WRITTEN TEST FOR THE POST OF Record Assistant

HALL TICKET-CUM-IDENTITY SHEET 24170740

DATE	TIME	NAME OF THE EXAMINATION CENTER
14/9/25	2:30pm-4pm	(to be filled by the Candidate) Gort. Jr. College opp: Gort. Area Hospital Mulugu
NAME AND FULL POSTAL ADDRESS OF THE CANDIDATE		
(to be filled by the Candidate)		
Balugu Thejaswi w/o Kannabhasan H.No: 3-67/2 Post: Bandas pally Mall: 2 Dist: Mulugu 506343		
B. Thejaswi Signature of the Candidate		 B. CHANDANAI Assistant Government Pleader Junior civil Judge Court Mulugu, Cell: 889710169

SECRETARY
DISTRICT LEGAL SERVICES AUTHORITY,
MULUGU.

3

ORIGINAL

REGD. No.: 24170741

DISTRICT LEGAL SERVICES AUTHORITY : MULUGU
WRITTEN TEST FOR THE POST OF Record - Assistant
HALL TICKET-CUM-IDENTITY SHEET

DATE	TIME	NAME OF THE EXAMINATION CENTER
14/9/25	2:30PM-4PM	Govt. Junior College, Opp: Govt. Area Hospital Mulugu
NAME AND FULL POSTAL ADDRESS OF THE CANDIDATE		
Vennela Vinod		
(to be filled by the Candidate)		
Hno: - 1-188 Mallampally (Village), Mulugu Mandal, Mulugu District		
Signature of the Candidate		 V. RACHITA Asst. Public Prosecutor

SECRETARY
DISTRICT LEGAL SERVICES AUTHORITY,
MULUGU

DUPLICATE

DISTRICT LEGAL SERVICES AUTHORITY : MULUGU
WRITTEN TEST FOR THE POST OF Record - Assistant

HALL TICKET-CUM-IDENTITY SHEET 24170741

DATE	TIME	NAME OF THE EXAMINATION CENTER
14/9/25	2:30PM-4PM	(to be filled by the Candidate) Govt. Junior College Opp: Govt. Area Hospital Mulugu
NAME AND FULL POSTAL ADDRESS OF THE CANDIDATE		
Vennela Vinod		
(to be filled by the Candidate)		
Hno: - 1-188 Mallampally (Village), Mulugu Mandal, Mulugu District.		
Signature of the Candidate		 V. RACHITA Asst. Public Prosecutor

SECRETARY
DISTRICT LEGAL SERVICES AUTHORITY,
MULUGU.

2
ORIGINAL

REGD. No.: 24170742

DISTRICT LEGAL SERVICES AUTHORITY - MULUGU
WRITTEN TEST FOR THE POST OF Record Assistant
HALL TICKET-CUM-IDENTITY SHEET

DATE	TIME	NAME OF THE EXAMINATION CENTER
14/9/25	2:30PM-4PM	Govt. Junior College Opp: Govt. Area Hospital Mulugu.
NAME AND FULL POSTAL ADDRESS OF THE CANDIDATE (to be filled by the Candidate)		
Balje. Sravan Kumar S/o Raghupati R/o. H.No. 1-102, Dharmaram, Nadikuda Hanamkonda, post No: 506391.		
Signature of the Candidate		 JUGANTI KOTESHA Advocate & Notary Public H.No. 16-11-267/1, Chinthal, Dist: WARANGAL, Telangana State

SECRETARY
DISTRICT LEGAL SERVICES AUTHORITY,
MULUGU

DUPLICATE

DISTRICT LEGAL SERVICES AUTHORITY : MULUGU
WRITTEN TEST FOR THE POST OF Record Assistant

HALL TICKET-CUM-IDENTITY SHEET 24170742

DATE	TIME	NAME OF THE EXAMINATION CENTER
14/9/25	2:30PM-4PM	(to be filled by the Candidate) Govt. Junior College Opp: Govt. Area Hospital Mulugu.
NAME AND FULL POSTAL ADDRESS OF THE CANDIDATE (to be filled by the Candidate)		
Balje. Sravan Kumar S/o Raghupati R/o. H.No. 1-102, Dharmaram, Nadikuda, Hanamkonda, post- 506391		
Signature of the Candidate		 JUGANTI KOTESHA Advocate & Notary Public H.No. 16-11-267/1, Chinthal, Dist: WARANGAL, Telangana State

SECRETARY
DISTRICT LEGAL SERVICES AUTHORITY,
MULUGU

3
ORIGINAL

REGD. No.: 24170743

DISTRICT LEGAL SERVICES AUTHORITY : MULUGU
WRITTEN TEST FOR THE POST OF Record Assistant
HALL TICKET-CUM-IDENTITY SHEET

DATE	TIME	NAME OF THE EXAMINATION CENTER
14/9/25	2:30PM-4PM	Govt. Junior College, opp:- Govt. Area Hospital Mulugu.
NAME AND FULL POSTAL ADDRESS OF THE CANDIDATE		
(to be filled by the Candidate)		
GAT NITHISH S/O RAMESH, D. NO: 4-192 KAPUWADA MULUGU (Vill, post, Mandal, Dist) PIN: 506343		
Signature of the Candidate		 G. Nithish Assistant Government Pleader

SECRETARY
DISTRICT LEGAL SERVICES AUTHORITY,
MULUGU

DUPLICATE

DISTRICT LEGAL SERVICES AUTHORITY : MULUGU
WRITTEN TEST FOR THE POST OF Record Assistant

HALL TICKET-CUM-IDENTITY SHEET 24170743

DATE	TIME	NAME OF THE EXAMINATION CENTER
14/9/25	2:30PM-4PM	Govt. Junior College opp:- Govt. Area Hospital Mulugu.
NAME AND FULL POSTAL ADDRESS OF THE CANDIDATE		
(to be filled by the Candidate)		
GAT NITHISH S/O RAMESH, D. NO: 4-192 KAPUWADA MULUGU (Vill, post, Mandal, Dist) PIN: 506343		
Signature of the Candidate		 G. Nithish Assistant Government Pleader Junior civil Judge Court Mulugu - Dist. 5067710168

SECRETARY
DISTRICT LEGAL SERVICES AUTHORITY,
MULUGU.

ORIGINAL

REGD. No.: 24170744

DISTRICT LEGAL SERVICES AUTHORITY : MULUGU
WRITTEN TEST FOR THE POST OF RECORD ASSISTANT
HALL TICKET-CUM-IDENTITY SHEET

DATE	TIME	NAME OF THE EXAMINATION CENTER
14/9/25	2:30PM-4PM	Govt. Junior College, Opp: Govt. Area Hospital Mulugu.
NAME AND FULL POSTAL ADDRESS OF THE CANDIDATE <u>Jarpula Sushmitha</u> (to be filled by the Candidate)		
H.NO: 8-17, VENKATAPUR (V), VENKATAPUR (M), MULUGU (D), TELANGANA, PIN: 506345		
Signature of the Candidate		 R. CHANDRAIAH Assistant Government Pleader Junior civil Judge Court Mulugu, Cell: 8897710160

SECRETARY
DISTRICT LEGAL SERVICES AUTHORITY,
MULUGU

DUPLICATE

DISTRICT LEGAL SERVICES AUTHORITY : MULUGU
WRITTEN TEST FOR THE POST OF RECORD ASSISTANT

HALL TICKET-CUM-IDENTITY SHEET 24170744

DATE	TIME	NAME OF THE EXAMINATION CENTER
14/9/25	2:30PM-4PM	(to be filled by the Candidate) Govt. Junior College, Opp: Govt. Area Hospital Mulugu.
NAME AND FULL POSTAL ADDRESS OF THE CANDIDATE <u>Jarpula Sushmitha</u> (to be filled by the Candidate)		
H.NO: 8-17, VENKATAPUR (V), VENKATAPUR (M), MULUGU (D), TELANGANA, PIN: 506345.		
Signature of the Candidate		 R. CHANDRAIAH Assistant Government Pleader Junior civil Judge Court Mulugu, Cell: 8897710160

SECRETARY
DISTRICT LEGAL SERVICES AUTHORITY,
MULUGU

ORIGINAL

REGD. No.: 24170745

DISTRICT LEGAL SERVICES AUTHORITY MULUGU
WRITTEN TEST FOR THE POST OF RECORD ASSISTANT
HALL TICKET-CUM-IDENTITY SHEET

DATE	TIME	NAME OF THE EXAMINATION CENTER
14/9/25	2:30PM-4PM	Govt. Junior College, OPP: Govt. Area Hospital Mulugu.
NAME AND FULL POSTAL ADDRESS OF THE CANDIDATE (to be filled by the Candidate)		
Gugulath Ganesh H.No: 5-137, THANDA, LAXMIDEVI PETA (vi), VENKATAPUR (m), MULUGU (di), TELANGANA, PIN: 506345.		
Signature of the Candidate		G. Ganesh



RAIAH
Assistant Government Pleader,
Junior civil Judge Court
Mulugu Cell: 8807710160

SECRETARY
DISTRICT LEGAL SERVICES AUTHORITY,
MULUGU

DUPLICATE

DISTRICT LEGAL SERVICES AUTHORITY MULUGU
WRITTEN TEST FOR THE POST OF RECORD ASSISTANT

HALL TICKET-CUM-IDENTITY SHEET

24170745

DATE	TIME	NAME OF THE EXAMINATION CENTER
14/9/25	2:30PM-4PM	Govt. Junior College, OPP: Govt. Area Hospital Mulugu.
NAME AND FULL POSTAL ADDRESS OF THE CANDIDATE (to be filled by the Candidate)		
Gugulath Ganesh H.No: 5-137, Thanda, Laxmidevipeta (vi) Venkatapur (m), Mulugu (di), Telangana, PIN: 506345		
Signature of the Candidate		G. Ganesh



RAIAH
Assistant Government Pleader,
Junior civil Judge Court
Mulugu Cell: 8807710160

SECRETARY
DISTRICT LEGAL SERVICES AUTHORITY,
MULUGU

3

ORIGINAL

REGD. No.: 24170746

DISTRICT LEGAL SERVICES AUTHORITY : MULUGU
WRITTEN TEST FOR THE POST OF Record Assistant
HALL TICKET-CUM-IDENTITY SHEET

DATE	TIME	NAME OF THE EXAMINATION CENTER
14/9/25	2:30PM-4PM	Govt. Junior College, Opp- Govt. Area Hospital Mulugu.
NAME AND FULL POSTAL ADDRESS OF THE CANDIDATE		
(to be filled by the Candidate)		
Balugu Chaitanya D. Chandrasekh H. NO: 3-72 Post: Bandarpally (V) Mandla Dist. Mulugu		
B. Chaitanya Signature of the Candidate		B. Chaitanya Assistant Government Pleader Junior civil Judge Court Mulugu. Cell: 8897710169

SECRETARY
DISTRICT LEGAL SERVICES AUTHORITY,
MULUGU

DUPLICATE

DISTRICT LEGAL SERVICES AUTHORITY : MULUGU
WRITTEN TEST FOR THE POST OF Record Assistant

HALL TICKET-CUM-IDENTITY SHEET 24170746

DATE	TIME	NAME OF THE EXAMINATION CENTER
14/9/25	2:30PM-4PM	(to be filled by the Candidate) Govt. Junior College, Opp- Govt. Area Hospital Mulugu.
NAME AND FULL POSTAL ADDRESS OF THE CANDIDATE		
(to be filled by the Candidate)		
Balugu Chaitanya D. Chandrasekh H. NO 372 Post: Bandarpally (V) Mandla Dist: Mulugu 506343		
Signature of the Candidate		B. Chaitanya Assistant Government Pleader Junior civil Judge Court Mulugu. Cell: 8897710169

SECRETARY
DISTRICT LEGAL SERVICES AUTHORITY,
MULUGU.

ORIGINAL

REGD. No.: 24170747

DISTRICT LEGAL SERVICES AUTHORITY : MULUGU
WRITTEN TEST FOR THE POST OF Record Assistant
HALL TICKET-CUM-IDENTITY SHEET

DATE	TIME	NAME OF THE EXAMINATION CENTER
14/9/25	2:30PM-4PM	Govt. Junior College, Opp- Govt Area Hospital Mulugu.
NAME AND FULL POSTAL ADDRESS OF THE CANDIDATE		
(to be filled by the Candidate)		
Alakunta. Bhanuchandera S/o. Balajiah R/o. Keshavapur, ventakapur, Mulugu Pin 1- 506343		
Signature of the Candidate		

SECRETARY
DISTRICT LEGAL SERVICES AUTHORITY,
MULUGU

DUPLICATE

DISTRICT LEGAL SERVICES AUTHORITY : MULUGU
WRITTEN TEST FOR THE POST OF Record Assistant

HALL TICKET-CUM-IDENTITY SHEET

DATE	TIME	NAME OF THE EXAMINATION CENTER
14/9/25	2:30PM-4PM	Govt. Junior College, Opp- Govt. Area Hospital Mulugu.
NAME AND FULL POSTAL ADDRESS OF THE CANDIDATE		
(to be filled by the Candidate)		
Alakunta. Bhanuchandera S/o. Balajiah R/o. Keshavapur, ventakapur, Mulugu Pin 1- 506343		
Signature of the Candidate		

SECRETARY
DISTRICT LEGAL SERVICES AUTHORITY,
MULUGU.

Attested
Incharge
Dept. of Political Science
Udy. Arts & Science College
Buddhan, K.U. Warangal-506001

ORIGINAL

REGD. No.: 24170748

DISTRICT LEGAL SERVICES AUTHORITY, WARANGAL
WRITTEN TEST FOR THE POST OF RECORD ASSISTANT
HALL TICKET-CUM-IDENTITY SHEET

DATE	TIME	NAME OF THE EXAMINATION CENTER
14/9/25	2:30PM-4PM	Govt. Junior College, Oppr. Govt. Area Hospital Mulugu.
NAME AND FULL POSTAL ADDRESS OF THE CANDIDATE		
(to be filled by the Candidate)		
GOKA PRIYANKA # 1-3-10, RAHAMATH NAGAR, ST. JOHNS HIGH SCHOOL, KAZIPET, WARANGAL, 506003		
G. Priyanka Signature of the Candidate		

SECRETARY
DISTRICT LEGAL SERVICES AUTHORITY,
WARANGAL

DUPLICATE

DISTRICT LEGAL SERVICES AUTHORITY, WARANGAL
WRITTEN TEST FOR THE POST OF RECORD ASSISTANT
HALL TICKET-CUM-IDENTITY SHEET 24170748

DATE	TIME	NAME OF THE EXAMINATION CENTER
14/9/25	2:30PM-4PM	Govt. Junior College, Oppr. Govt. Area Hospital Mulugu
NAME AND FULL POSTAL ADDRESS OF THE CANDIDATE		
(to be filled by the Candidate)		
GOKA PRIYANKA # 1-3-10, RAHAMATH NAGAR, ST. JOHNS HIGH SCHOOL, KAZIPET, WARANGAL, 506003		
G. Priyanka Signature of the Candidate		

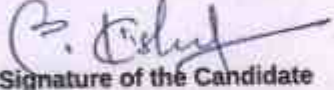
SECRETARY

ORIGINAL

REGD. No.:

24170749

DISTRICT LEGAL SERVICES AUTHORITY : MULUGU
WRITTEN TEST FOR THE POST OF Record Assistant
HALL TICKET-CUM-IDENTITY SHEET

DATE	TIME	NAME OF THE EXAMINATION CENTER
14/9/25	2:30PM-4PM	Govt. Junior College, Opp: Govt. Area Hospital Mulugu.
NAME AND FULL POSTAL ADDRESS OF THE CANDIDATE		
(to be filled by the Candidate)		
MADUGULA. KISHORE S/o Rajalingam H.no 33-6-42 Rangopalapuram Khila Warrangal Warrangal 506005 cell: 9989712898		
		
 Signature of the Candidate		

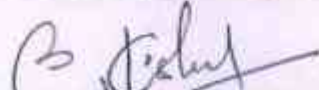
SECRETARY
DISTRICT LEGAL SERVICES AUTHORITY,
MULUGU

DUPLICATE

DISTRICT LEGAL SERVICES AUTHORITY : MULUGU
WRITTEN TEST FOR THE POST OF Record Assistant

HALL TICKET-CUM-IDENTITY SHEET

24170749

DATE	TIME	NAME OF THE EXAMINATION CENTER
14/09/25	2:30PM-4PM	Govt. Junior College, Opp: Govt. Area Hospital Mulugu.
NAME AND FULL POSTAL ADDRESS OF THE CANDIDATE		
(to be filled by the Candidate)		
MADUGULA. KISHORE S/o Rajalingam H.no 33-6-42 Rangopalapuram Khila Warrangal Warrangal. 506005 cell: 9989712898		
		
 Signature of the Candidate		

SECRETARY
DISTRICT LEGAL SERVICES AUTHORITY,
MULUGU.

3

ORIGINAL

REGD. No.: 24170750

DISTRICT LEGAL SERVICES AUTHORITY : MULUGU
WRITTEN TEST FOR THE POST OF Record Assistant
HALL TICKET-CUM-IDENTITY SHEET

DATE	TIME	NAME OF THE EXAMINATION CENTER
14/9/25	2:30PM-4PM	Govt. Junior College, opp:- Govt Area Hospital Mulugu.
NAME AND FULL POSTAL ADDRESS OF THE CANDIDATE (to be filled by the Candidate)		
Gugulath Rajendar 10-14 peddakuntapally, veshalapally, Bhupalapally, 506169 Cell: 6309592256.		
Signature of the Candidate		G. Rajendar



Medical Officer
PHC NALLABELLI
Dist. Warangal

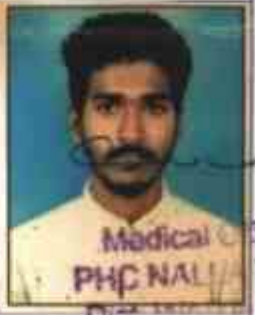
SECRETARY
DISTRICT LEGAL SERVICES AUTHORITY,
MULUGU

DUPLICATE

DISTRICT LEGAL SERVICES AUTHORITY : MULUGU
WRITTEN TEST FOR THE POST OF Record Assistant

HALL TICKET-CUM-IDENTITY SHEET 24170750

DATE	TIME	NAME OF THE EXAMINATION CENTER
14/9/25	2:30PM-4PM	(to be filled by the Candidate) Govt. Junior College, opp:- Govt. Area Hospital, Mulugu.
NAME AND FULL POSTAL ADDRESS OF THE CANDIDATE (to be filled by the Candidate)		
Gugulath Rajendar 10-14 peddakuntapally, veshalapally, Bhupalapally, 506169 Cell: 6309592256.		
Signature of the Candidate		G. Rajendar



Medical Officer
PHC NALLABELLI
Dist. Warangal

SECRETARY
DISTRICT LEGAL SERVICES AUTHORITY,
MULUGU

ORIGINAL

REGD. No.:

24170751

DISTRICT LEGAL SERVICES AUTHORITY : MULUGU
 WRITTEN TEST FOR THE POST OF RECORD ASSISTANT
 HALL TICKET-CUM-IDENTITY SHEET

DATE	TIME	NAME OF THE EXAMINATION CENTER
14/9/25	2:30PM-4PM	Govt. Junior College Opp: Govt. Area Hospital, Mulugu.
NAME AND FULL POSTAL ADDRESS OF THE CANDIDATE (to be filled by the Candidate)		
Gugulab Rajasekhara H.No: 5-137, Thanda, Laxmidvipeta (vi), Venkatapur (m), mulugu (di), Telangana, Pin: 506345, 7013834904		
Signature of the Candidate		 B. CHANDRASEKHARA Assistant Government Pleader, Junior civil Judge Court Mulugu, Cell: 8807710160

Raj

SECRETARY

DISTRICT LEGAL SERVICES AUTHORITY,
MULUGU

DUPLICATE

DISTRICT LEGAL SERVICES AUTHORITY : MULUGU
 WRITTEN TEST FOR THE POST OF RECORD ASSISTANT

HALL TICKET-CUM-IDENTITY SHEET

24170751

DATE	TIME	NAME OF THE EXAMINATION CENTER
14/9/25	2:30PM-4PM	Govt. Junior College Opp: Govt. Area Hospital, Mulugu.
NAME AND FULL POSTAL ADDRESS OF THE CANDIDATE (to be filled by the Candidate)		
Gugulab Rajasekhara H.No: 5-137, Thanda, Laxmidvipeta (vi), Venkatapur (m), mulugu (di), Telangana, Pin: 506345, 7013834904		
Signature of the Candidate		 B. CHANDRASEKHARA Assistant Government Pleader, Junior civil Judge Court Mulugu, Cell: 8807710160

Raj

SECRETARY

DISTRICT LEGAL SERVICES AUTHORITY,
MULUGU.

ORIGINAL

REGD. No.: 24170752

DISTRICT LEGAL SERVICES AUTHORITY : MULUGU
 WRITTEN TEST FOR THE POST OF Record Assistant
 HALL TICKET-CUM-IDENTITY SHEET

DATE	TIME	NAME OF THE EXAMINATION CENTER
14/9/25	2:30PM-4PM	Govt. Junior College, Opp: Govt. Area Hospital, Mulugu.
NAME AND FULL POSTAL ADDRESS OF THE CANDIDATE		
(to be filled by the Candidate)		
Lavudya. Rajender ; s/o - L. Dasunnaik Nagasingapur (V), Borlagudem (P), Pin: 505503 Mahabubnagar, Jayashankar Bhupalpally		
Signature of the Candidate		 Medical Officer PHC Azamnagar Bhupalpally (Dist)

SECRETARY
 DISTRICT LEGAL SERVICES AUTHORITY,
 MULUGU

DUPLICATE

DISTRICT LEGAL SERVICES AUTHORITY : MULUGU
 WRITTEN TEST FOR THE POST OF Record Assistant

HALL TICKET-CUM-IDENTITY SHEET

DATE	TIME	NAME OF THE EXAMINATION CENTER
14/9/25	2:30PM-4PM	Govt. Junior College, Opp: Govt. Area Hospital Mulugu.
NAME AND FULL POSTAL ADDRESS OF THE CANDIDATE		
(to be filled by the Candidate)		
Lavudya. Rajender ; s/o - L. Dasunnaik Nagasingapur, Borlagudem Mahabo nagar, Jayashankar Bhupalpally -505503		
Signature of the Candidate		 Medical Officer PHC Azamnagar Bhupalpally (Dist)

SECRETARY
 DISTRICT LEGAL SERVICES AUTHORITY,
 MULUGU.

ORIGINAL

REGD. No.: 24170753

DISTRICT LEGAL SERVICES AUTHORITY : MULUGU
WRITTEN TEST FOR THE POST OF Record Assistant
HALL TICKET-CUM-IDENTITY SHEET

DATE	TIME	NAME OF THE EXAMINATION CENTER
14/9/25	2:30pm-4pm	Govt. Junior College, opp: Govt. Area Hospital mulugu
NAME AND FULL POSTAL ADDRESS OF THE CANDIDATE		
(to be filled by the Candidate)		
LAVUDYA KRISHNAVENI w/o RAJENDER (V) NARSINGAPUR (P) BORLAGudem (M) MAHAMUTHARAM (D) JAYASHANKAR Bhupalpally 505503		
P. Krishnaveni Signature of the Candidate		 Medical Officer PHC Azamgarh Bhupalpally (Dist)

SECRETARY
DISTRICT LEGAL SERVICES AUTHORITY,
MULUGU

DUPLICATE

DISTRICT LEGAL SERVICES AUTHORITY : MULUGU
WRITTEN TEST FOR THE POST OF Record Assistant

HALL TICKET-CUM-IDENTITY SHEET 24170753

DATE	TIME	NAME OF THE EXAMINATION CENTER
14/9/25	2:30pm-4pm	(to be filled by the Candidate) Govt. Junior College opp: Govt. Area Hospital mulugu
NAME AND FULL POSTAL ADDRESS OF THE CANDIDATE		
(to be filled by the Candidate)		
LAVUDYA KRISHNAVENI w/o RAJENDER (V) NARSINGAPUR (P) BORLAGudem (M) MAHAMUTHARAM (D) JAYASHANKAR BHUPALPALLY (PIN) 505503.		
P. Krishnaveni Signature of the Candidate		 Medical Officer PHC Azamgarh Bhupalpally (Dist)

SECRETARY
DISTRICT LEGAL SERVICES AUTHORITY,
MULUGU.

ORIGINAL

REGD. No.: 24170754

DISTRICT LEGAL SERVICES AUTHORITY : MULUGU WRITTEN TEST FOR THE POST OF RECORD ASSISTANT HALL TICKET-CUM-IDENTITY SHEET

DATE	TIME	NAME OF THE EXAMINATION CENTER
14/9/25	2:30pm-4pm	Govt. Junior College, opp:- Govt. Area Hospital Mulugu
NAME AND FULL POSTAL ADDRESS OF THE CANDIDATE (to be filled by the Candidate)		
Narells Manasa H.No: 1-196/10; village: Mallampally; Mandal: Mulugu; District: Mulugu; Telangana; pin-code: 506349		
Signature of the Candidate		N. Manasa



Medical Officer
PHC NALLABALLY
Dist. WARANGAL

SECRETARY

DISTRICT LEGAL SERVICES AUTHORITY,
MULUGU

DUPLICATE

DISTRICT LEGAL SERVICES AUTHORITY : MULUGU WRITTEN TEST FOR THE POST OF RECORD ASSISTANT

HALL TICKET-CUM-IDENTITY SHEET 24170754

DATE	TIME	NAME OF THE EXAMINATION CENTER
14/9/25	2:30pm-4pm	(to be filled by the Candidate) District Court Complex, Mulugu Govt. Junior College, opp:- Govt. Area Hospital Mulugu
NAME AND FULL POSTAL ADDRESS OF THE CANDIDATE (to be filled by the Candidate)		
Narells Manasa H.No: 1-196/10; village: Mallampally; Mandal: Mulugu; District: Mulugu; Telangana; pin-code: 506349		
Signature of the Candidate		N. Manasa



Medical Officer
PHC NALLABALLY
Dist. WARANGAL

SECRETARY

DISTRICT LEGAL SERVICES AUTHORITY,
MULUGU.

ORIGINAL

REGD. No.: 24170755

DISTRICT LEGAL SERVICES AUTHORITY : MULUGU
WRITTEN TEST FOR THE POST OF Record Assistant
HALL TICKET-CUM-IDENTITY SHEET

DATE	TIME	NAME OF THE EXAMINATION CENTER
14/9/25	2:30pm-4pm	Govt. Junior College, opp: Govt. Area Hospital Mulugu
NAME AND FULL POSTAL ADDRESS OF THE CANDIDATE		
(to be filled by the Candidate)		
PADYA AJAY S/O GANGU NAIK H-NO 3-43, ANNAMPALLY, MULUGU, M		
Signature of the Candidate		 P. Ajay



B. CHANDRASEKHARAIAH
Assistant Government Pleader
Junior civil Judge Court
Mulugu. Cell: 8897710169

SECRETARY

DISTRICT LEGAL SERVICES AUTHORITY,
MULUGU

DUPLICATE

DISTRICT LEGAL SERVICES AUTHORITY : MULUGU
WRITTEN TEST FOR THE POST OF Record Assistant

HALL TICKET-CUM-IDENTITY SHEET 24170755

DATE	TIME	NAME OF THE EXAMINATION CENTER
14/9/25	2:30pm-4pm	(to be filled by the Candidate) Govt. Junior College, opp: Govt. Area Hospital Mulugu
NAME AND FULL POSTAL ADDRESS OF THE CANDIDATE		
(to be filled by the Candidate)		
PADYA AJAY S/O GANGU NAIK H-NO 3-43, ANNAMPALLY, MULUGU, mulugu		
Signature of the Candidate		 P. Ajay



B. CHANDRASEKHARAIAH
Assistant Government Pleader
Junior civil Judge Court
Mulugu. Cell: 8897710169

SECRETARY

DISTRICT LEGAL SERVICES AUTHORITY,
MULUGU.

ORIGINAL

REGD. No.: 24170756

DISTRICT LEGAL SERVICES AUTHORITY - MULUGU
WRITTEN TEST FOR THE POST OF Record Assistant
HALL TICKET-CUM-IDENTITY SHEET

DATE	TIME	NAME OF THE EXAMINATION CENTER
~~15/12/2024~~ 14/9/25	~~10:30 AM~~ 2:30 PM - 4 PM	~~District Court complex, mulugu~~ Govt. Junior College, opp. Govt. Area Hospital mulugu
NAME AND FULL POSTAL ADDRESS OF THE CANDIDATE		
(to be filled by the Candidate)		
Manthana. Mounika D/o. Sambaiah H: NO: 5-267, SV-colony, Laxmidevipeta (vi) Venkatapur (M), mulugu (D), 506345		
Signature of the Candidate	M. Mounika	
		 NAIB TAHSILDAR VENKATAPUR (M), Mulugu District.

SECRETARY
DISTRICT LEGAL SERVICES AUTHORITY,
MULUGU

DUPLICATE

DISTRICT LEGAL SERVICES AUTHORITY : MULUGU
WRITTEN TEST FOR THE POST OF Record Assistant

HALL TICKET-CUM-IDENTITY SHEET 24170756

DATE	TIME	NAME OF THE EXAMINATION CENTER
~~15/12/2024~~ 14/9/25	~~10:30 AM~~ 2:30 PM - 4 PM	~~District Court complex, mulugu~~ Govt. Junior College, opp. Govt. Area Hospital mulugu
NAME AND FULL POSTAL ADDRESS OF THE CANDIDATE		
(to be filled by the Candidate)		
Manthana. Mounika D/o. Sambaiah H: NO: 5-267, SV-colony, Laxmidevipeta (vi) Venkatapur (M), mulugu (D), 506345		
Signature of the Candidate	M. Mounika	
		 NAIB TAHSILDAR VENKATAPUR (M), Mulugu District.

SECRETARY
DISTRICT LEGAL SERVICES AUTHORITY,
MULUGU.

ORIGINAL

REGD. No.:

24170757

DISTRICT LEGAL SERVICES AUTHORITY : MULUGU
WRITTEN TEST FOR THE POST OF RECORD ASSISTANT
HALL TICKET-CUM-IDENTITY SHEET

DATE	TIME	NAME OF THE EXAMINATION CENTER
14/9/25	2:30pm-4pm	Govt. Junior College, opp. Govt. Area Hospital Mulugu
NAME AND FULL POSTAL ADDRESS OF THE CANDIDATE		
(to be filled by the Candidate)		
BANOTHU SONIYA D/O - DEEPLAL House No: 3-111/1. Pastranagaram, GOWINDRAOPET, MULUGU 506347		
Signature of the Candidate		B. Soniya



CIVIL SURGEON
DISTRICT HOSPITAL MULUGU

SECRETARY
DISTRICT LEGAL SERVICES AUTHORITY,
MULUGU

DUPLICATE

DISTRICT LEGAL SERVICES AUTHORITY : MULUGU
WRITTEN TEST FOR THE POST OF RECORD ASSISTANT

HALL TICKET-CUM-IDENTITY SHEET

24170757

DATE	TIME	NAME OF THE EXAMINATION CENTER
14/9/25	2:30pm-4pm	(to be filled by the Candidate) Govt. Junior College opp. Govt. Area Hospital Mulugu
NAME AND FULL POSTAL ADDRESS OF THE CANDIDATE		
(to be filled by the Candidate)		
BANOTHU SONIYA D/O - DEEPLAL House No: 3-111/1. Pastranagaram, GOWINDRAOPET, MULUGU 506347		
Signature of the Candidate		B. Soniya



CIVIL SURGEON
DISTRICT HOSPITAL MULUGU

SECRETARY
DISTRICT LEGAL SERVICES AUTHORITY,
MULUGU.

ORIGINAL

REGD. No.: 24170758

DISTRICT LEGAL SERVICES AUTHORITY - MULUGU
WRITTEN TEST FOR THE POST OF RECORD ASSISTANT
HALL TICKET-CUM-IDENTITY SHEET

DATE	TIME	NAME OF THE EXAMINATION CENTER
14/9/25	2:30pm-4pm	Govt. Junior College opp: Govt. Area Hospital Mulugu
NAME AND FULL POSTAL ADDRESS OF THE CANDIDATE (to be filled by the Candidate)		
BOGA NAVYASRI W/O MUDUPU RAJENDAR H.NO. 1-144, DUMPELLYGUDEM(M) GOVINDARAOPET (D) MULUGU -506344 CELL-7842668912		
Signature of the Candidate		B. Nayassri



Veterinary Assistant Surgeon
Primary Veterinary Centre
Govindaraopet, Dist: Mulugu

SECRETARY

DISTRICT LEGAL SERVICES AUTHORITY,
MULUGU

DUPLICATE

DISTRICT LEGAL SERVICES AUTHORITY - MULUGU
WRITTEN TEST FOR THE POST OF RECORD ASSISTANT

HALL TICKET-CUM-IDENTITY SHEET

24170758

DATE	TIME	NAME OF THE EXAMINATION CENTER
14/9/25	2:30pm-4pm	Govt. Junior College opp: Govt. Area Hospital Mulugu
NAME AND FULL POSTAL ADDRESS OF THE CANDIDATE (to be filled by the Candidate)		
BOGA NAVYASRI W/O MUDUPU RAJENDAR H.NO. 1-144, DUMPELLYGUDEM(M) GOVINDARAOPET (D) MULUGU (Pin) 506344, CELL-7842668912		
Signature of the Candidate		B. Nayassri



Veterinary Assistant Surgeon
Primary Veterinary Centre
Govindaraopet, Dist: Mulugu

SECRETARY

DISTRICT LEGAL SERVICES AUTHORITY,
MULUGU

ORIGINAL

REGD. No.:

24170759

DISTRICT LEGAL SERVICES AUTHORITY : MULUGU
WRITTEN TEST FOR THE POST OF Record Assistant
HALL TICKET-CUM-IDENTITY SHEET

DATE	TIME	NAME OF THE EXAMINATION CENTER
14/9/25	2:30pm-4pm	Govt. Junior College opp- Govt. Area Hospital Mulugu
NAME AND FULL POSTAL ADDRESS OF THE CANDIDATE (to be filled by the Candidate)		
MOHAMMAD. NAYEEMUNNISA 7-124, Main Road, Mulugu		
Md. Nayeemunnisa Signature of the Candidate		 CIVIL ASSISTANT SURGEON DISTRICT HOSPITAL MULUGU

SECRETARY
DISTRICT LEGAL SERVICES AUTHORITY,
MULUGU

DUPLICATE

DISTRICT LEGAL SERVICES AUTHORITY : MULUGU
WRITTEN TEST FOR THE POST OF Record Assistant

HALL TICKET-CUM-IDENTITY SHEET

24170759

DATE	TIME	NAME OF THE EXAMINATION CENTER
14/9/25	2:30pm-4pm	(to be filled by the Candidate) Govt. Junior College opp- Govt. Area Hospital Mulugu
NAME AND FULL POSTAL ADDRESS OF THE CANDIDATE (to be filled by the Candidate)		
MOHAMMAD. NAYEEMUNNISA 7-124, Main Road, Mulugu		
Md. Nayeemunnisa Signature of the Candidate		 CIVIL ASSISTANT SURGEON DISTRICT HOSPITAL MULUGU

SECRETARY
DISTRICT LEGAL SERVICES AUTHORITY,
MULUGU.

ORIGINAL

REGD. No.: 24170760

DISTRICT LEGAL SERVICES AUTHORITY : MULUGU
WRITTEN TEST FOR THE POST OF Record Assistant
HALL TICKET-CUM-IDENTITY SHEET

DATE	TIME	NAME OF THE EXAMINATION CENTER
14/9/25	2:30pm-4pm	Gort-Junior college, opp:- Gort-Area Hospital Mulugu
NAME AND FULL POSTAL ADDRESS OF THE CANDIDATE (to be filled by the Candidate)		
Mamidi Devendag S/o Bhaoraiah v:- Tangalapally pin 506352 m&D:- mulugu		
Signature of the Candidate		 CIVIL ASSISTANT SURGEON DISTRICT HOSPITAL MULUGU

SECRETARY
DISTRICT LEGAL SERVICES AUTHORITY,
MULUGU

DUPLICATE

DISTRICT LEGAL SERVICES AUTHORITY : MULUGU
WRITTEN TEST FOR THE POST OF Record Assistant
HALL TICKET-CUM-IDENTITY SHEET

24170760

DATE	TIME	NAME OF THE EXAMINATION CENTER
14/9/25	2:30pm-4pm	Gort-Junior College, opp:- Gort-Area Hospital Mulugu
NAME AND FULL POSTAL ADDRESS OF THE CANDIDATE (to be filled by the Candidate)		
Mamidi Devendag S/o. Bhaoraiah ; pin 506352 v:- Tangalapally ; m&D:- mulugu		
Signature of the Candidate		 CIVIL ASSISTANT SURGEON DISTRICT HOSPITAL MULUGU

SECRETARY
DISTRICT LEGAL SERVICES AUTHORITY,
MULUGU.

ORIGINAL

REGD. No.: 24170761

DISTRICT LEGAL SERVICES AUTHORITY : MULUGU
WRITTEN TEST FOR THE POST OF Record Assistant
HALL TICKET-CUM-IDENTITY SHEET

DATE	TIME	NAME OF THE EXAMINATION CENTER
14/9/25	2:30pm-4pm	<u>Govt. Junior College</u> <u>opp. Govt. Area Hospital, mulugu</u> ~~PAINDLA PRIYANKA~~
NAME AND FULL POSTAL ADDRESS OF THE CANDIDATE <u>Paindla priyanka</u> (to be filled by the Candidate)		
5-149 c/2/A, Teacher's colony, Passa, mdl. Govindrapet, mulugu 506347		
Signature of the Candidate		 <u>Paindla priyanka</u>

SECRETARY
DISTRICT LEGAL SERVICES AUTHORITY,
MULUGU

DUPLICATE

DISTRICT LEGAL SERVICES AUTHORITY : MULUGU
WRITTEN TEST FOR THE POST OF Record Assistant

HALL TICKET-CUM-IDENTITY SHEET 24170761

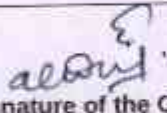
DATE	TIME	NAME OF THE EXAMINATION CENTER
14/9/25	2:30pm-4pm	<u>Govt. Junior College</u> <u>opp. Govt. Area Hospital, mulugu</u> ~~PAINDLA PRIYANKA~~
NAME AND FULL POSTAL ADDRESS OF THE CANDIDATE <u>Paindla priyanka</u> (to be filled by the Candidate)		
5-149 c/2/A, Teacher's colony, Passa, mdl. Govindrapet, mulugu, 506347.		
Signature of the Candidate		 <u>Paindla priyanka</u>

SECRETARY
DISTRICT LEGAL SERVICES AUTHORITY,
MULUGU.

ORIGINAL

REGD. No.: 24170762

DISTRICT LEGAL SERVICES AUTHORITY : MULUGU
 WRITTEN TEST FOR THE POST OF Record Assistant
 HALL TICKET-CUM-IDENTITY SHEET

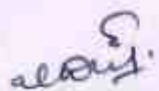
DATE	TIME	NAME OF THE EXAMINATION CENTER
14/9/25	2:30pm-4pm	Govt Junior College opp: Govt Area Hospital Mulugu
NAME AND FULL POSTAL ADDRESS OF THE CANDIDATE		
(to be filled by the Candidate)		
EERA .PRADEEP KUMAR 1-277/7/D, Srinivas colony, Mulugu, 506343		
Signature of the Candidate		 Medical Officer PHC NALLABELLY Dist WARANGAL
		

SECRETARY
 DISTRICT LEGAL SERVICES AUTHORITY,
 MULUGU

DUPLICATE

DISTRICT LEGAL SERVICES AUTHORITY : MULUGU
 WRITTEN TEST FOR THE POST OF Record Assistant

HALL TICKET-CUM-IDENTITY SHEET

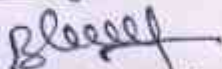
DATE	TIME	NAME OF THE EXAMINATION CENTER
14/9/25	2:30pm-4pm	Govt Junior College opp: Govt Area Hospital Mulugu
NAME AND FULL POSTAL ADDRESS OF THE CANDIDATE		
(to be filled by the Candidate)		
EERA .PRADEEP KUMAR 1-277/7/D, Srinivas colony, mulugu 506343		
Signature of the Candidate		 Medical Officer PHC NALLABELLY Dist WARANGAL
		

SECRETARY
 DISTRICT LEGAL SERVICES AUTHORITY,
 MULUGU.

ORIGINAL

REGD. No.: 24170763

DISTRICT LEGAL SERVICES AUTHORITY: MULUGU
WRITTEN TEST FOR THE POST OF Record Assistant
HALL TICKET-CUM-IDENTITY SHEET

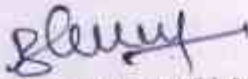
DATE	TIME	NAME OF THE EXAMINATION CENTER
14/9/25	2:30pm-4pm	Govt. Junior College opp. Govt. Area Hospital Mulugu
NAME AND FULL POSTAL ADDRESS OF THE CANDIDATE (to be filled by the Candidate)		
VISLAVATH. BHEEMA 6-115, Jeevantharapally, Mulugu (mandal) Mulugu District - 506343		
Signature of the Candidate 		 District Welfare Officer Women, Children Disabled & Senior Citizens Dept., Mulugu District

SECRETARY
DISTRICT LEGAL SERVICES AUTHORITY,
MULUGU

DUPLICATE

DISTRICT LEGAL SERVICES AUTHORITY: MULUGU
WRITTEN TEST FOR THE POST OF Record Assistant

HALL TICKET-CUM-IDENTITY SHEET

DATE	TIME	NAME OF THE EXAMINATION CENTER
15-12-2024	10:30am	District court complex
14/9/25	2:30pm-4pm	Mulugu
NAME AND FULL POSTAL ADDRESS OF THE CANDIDATE (to be filled by the Candidate)		
VISLAVATH. BHEEMA 6-115, Jeevantharapally, Mulugu (mandal) Mulugu District - 506343		
Signature of the Candidate 		 District Welfare Officer Women, Children Disabled & Senior Citizens Dept., Mulugu District

SECRETARY
DISTRICT LEGAL SERVICES AUTHORITY,
MULUGU.

ORIGINAL

REGD. No.:

24170764

3

DISTRICT LEGAL SERVICES AUTHORITY - MULUGU
 WRITTEN TEST FOR THE POST OF Record Assistant
 HALL TICKET-CUM-IDENTITY SHEET

DATE	TIME	NAME OF THE EXAMINATION CENTER
14/9/25	2:30pm-4pm	Govt. Junior College, opp: Govt. Area Hospital mulugu
NAME AND FULL POSTAL ADDRESS OF THE CANDIDATE (to be filled by the Candidate)		
PORIKA SONY. LAXMIDEVIPET, Venkatapur, Mulugu Pincode :- 506395		
P. Sony Signature of the Candidate		(P. Sony.)



Surgeon
 ABELLY
 Dist. WARD, GAL

SECRETARY
 DISTRICT LEGAL SERVICES AUTHORITY,
 MULUGU

DUPLICATE

DISTRICT LEGAL SERVICES AUTHORITY - MULUGU
 WRITTEN TEST FOR THE POST OF Record Assistant

HALL TICKET-CUM-IDENTITY SHEET

24170764

DATE	TIME	NAME OF THE EXAMINATION CENTER
14/9/25	2:30pm-4pm	Govt. Junior College, opp: Govt. Area Hospital mulugu
NAME AND FULL POSTAL ADDRESS OF THE CANDIDATE (to be filled by the Candidate)		
porika Sony. Laxmidevipet, Venkatapur, Mulugu. Pincode :- 506395		
P. Sony Signature of the Candidate		(P. Sony.)



Surgeon
 ABELLY
 Dist. WARD, GAL

SECRETARY
 DISTRICT LEGAL SERVICES AUTHORITY,
 MULUGU

ORIGINAL

REGD. No.:

24170765

DISTRICT LEGAL SERVICES AUTHORITY : MULUGU
 WRITTEN TEST FOR THE POST OF Record Assistant
 HALL TICKET-CUM-IDENTITY SHEET

DATE	TIME	NAME OF THE EXAMINATION CENTER
15/12/24	10:30 AM	District Court complex, mulugu
14/9/25	2:30 PM - 4 PM	
NAME AND FULL POSTAL ADDRESS OF THE CANDIDATE (to be filled by the Candidate)		
Jaganmama Mamatha		
vi; lammidevpet m; venkatapur		
D; mulugu pin code; 506345		
Signature of the Candidate		J. mamatha



SECRETARY
 DISTRICT LEGAL SERVICES AUTHORITY,
 MULUGU

DUPLICATE

DISTRICT LEGAL SERVICES AUTHORITY : MULUGU
 WRITTEN TEST FOR THE POST OF Record Assistant

HALL TICKET-CUM-IDENTITY SHEET

DATE	TIME	NAME OF THE EXAMINATION CENTER
15/12/24	10:30 AM	District Court complex, mulugu
14/9/25	2:30 PM - 4 PM	
NAME AND FULL POSTAL ADDRESS OF THE CANDIDATE (to be filled by the Candidate)		
Jaganmama Mamatha		
vi; lammidevpet m; venkatapur		
D; mulugu pin code; 506345		
Signature of the Candidate		J. mamatha



SECRETARY
 DISTRICT LEGAL SERVICES AUTHORITY,
 MULUGU.

ORIGINAL

REGD. No.: 24170766

DISTRICT LEGAL SERVICES AUTHORITY : MULUGU
WRITTEN TEST FOR THE POST OF Record Assistant
HALL TICKET-CUM-IDENTITY SHEET

DATE	TIME	NAME OF THE EXAMINATION CENTER
14/9/25	2:30pm-4pm	Govt. Junior College, opp: Govt. Area Hospital mulugu
NAME AND FULL POSTAL ADDRESS OF THE CANDIDATE		
(to be filled by the Candidate) Dommati. sukanya Dlo Mogili H.NO: 4-40 Bandrupally, Mulugu Telangana, pincode- 506343 Bandrupally, mulugu		
Signature of the Candidate		D. Sukanya



SECRETARY

DISTRICT LEGAL SERVICES AUTHORITY,
MULUGU

DUPLICATE

DISTRICT LEGAL SERVICES AUTHORITY : MULUGU
WRITTEN TEST FOR THE POST OF Record Assistant

HALL TICKET-CUM-IDENTITY SHEET 24170766

DATE	TIME	NAME OF THE EXAMINATION CENTER
14/9/25	2:30pm-4pm	(to be filled by the Candidate) Govt. Junior College, opp: Govt. Area Hospital mulugu
NAME AND FULL POSTAL ADDRESS OF THE CANDIDATE		
(to be filled by the Candidate) Dommati. sukanya Dlo. Mogili H.NO: 4-40 Bandrupally, Mulugu Telangana, pincode- 506343 Bandrupally, mulugu		
Signature of the Candidate		D. Sukanya



Assistant Government Pleader
Junior civil Judge Court
Mulugu Cell: 8897701100

SECRETARY

DISTRICT LEGAL SERVICES AUTHORITY,
MULUGU.

ORIGINAL

REGD. No.: 24170767

3

DISTRICT LEGAL SERVICES AUTHORITY, MULUGU
WRITTEN TEST FOR THE POST OF Record Assistant
HALL TICKET-CUM-IDENTITY SHEET

DATE	TIME	NAME OF THE EXAMINATION CENTER
~~15/12/24~~	~~10:30 AM~~	~~District Court Complex Mulugu~~
14/9/25	2:30pm-4pm	
NAME AND FULL POSTAL ADDRESS OF THE CANDIDATE		
(to be filled by the Candidate)		
NAKUVALA MANGESHA D/O MALLESHAM HNO 50-6-24, near Sree Rama colony, Uthatech Cement shop building 2nd floor Arepalli, Warangal, Telangana, 506006		
Signature of the Candidate		

Govt. Junior College
opp: Govt. Area Hospital
Mulugu

SECRETARY
DISTRICT LEGAL SERVICES AUTHORITY,
MULUGU

DUPLICATE

DISTRICT LEGAL SERVICES AUTHORITY, MULUGU
WRITTEN TEST FOR THE POST OF Record Assistant

HALL TICKET-CUM-IDENTITY SHEET

DATE	TIME	NAME OF THE EXAMINATION CENTER
~~15/12/24~~	~~10:30 AM~~	~~District Court Complex Mulugu~~
14/9/25	2:30pm-4pm	
NAME AND FULL POSTAL ADDRESS OF THE CANDIDATE		
(to be filled by the Candidate)		
NAKUVALA MANGESHA D/O MALLESHAM, HNO 50-6-24, near Sree Rama colony, Uthatech Cement shop building 2nd floor Arepalli, Warangal, Telangana, 506006		
Signature of the Candidate		

Govt. Junior College
opp: Govt. Area Hospital
Mulugu

SECRETARY
DISTRICT LEGAL SERVICES AUTHORITY,
MULUGU.

(4)

ORIGINAL

REGD. No.: 24170768

DISTRICT LEGAL SERVICES AUTHORITY, WARANGAL
 WRITTEN TEST FOR THE POST OF Typist cum Assistant
 HALL TICKET-CUM-IDENTITY SHEET

Record Assistant

DATE	TIME	NAME OF THE EXAMINATION CENTER
14/9/25	2:30pm-4pm	Govt. Junior College, opp: Govt. Area Hospital Mulugu
NAME AND FULL POSTAL ADDRESS OF THE CANDIDATE		
(to be filled by the Candidate)		
H. no: 5-44, motlagudem (vill), malluru (post), manga Peta (mch), mulugu (dist), Pincode 506172 Cell no: 9963264380		
Signature of the Candidate		M. Thulasi



Gazetted Head Master

Govt. T.W. Ashram High School for Girls
 Akulavarighanpur, Eturanagaram M.
 Mulugu Dist -506 165, T.S.

SECRETARY
 DISTRICT LEGAL SERVICES AUTHORITY,
 WARANGAL MULUGU

DUPLICATE

DISTRICT LEGAL SERVICES AUTHORITY, WARANGAL
 WRITTEN TEST FOR THE POST OF Typist cum Assistant
 HALL TICKET-CUM-IDENTITY SHEET

Record Assistant

DATE	TIME	NAME OF THE EXAMINATION CENTER
14/9/25	2:30pm-4pm	Govt. Junior College, opp: Govt. Area Hospital Mulugu
NAME AND FULL POSTAL ADDRESS OF THE CANDIDATE		
(to be filled by the Candidate)		
H. no: 5-44, motlagudem (vill), malluru (post), manga Peta (mch), mulugu (dist), Pincode 506172 Cell no: 9963264380		
Signature of the Candidate		M. Thulasi



Gazetted Head Master

Govt. T.W. Ashram High School for Girls
 Akulavarighanpur, Eturanagaram M.
 Mulugu Dist -506 165, T.S.

SECRETARY

5

ORIGINAL

REGD. No.: 24170769

DISTRICT LEGAL SERVICES AUTHORITY - MULUGU
WRITTEN TEST FOR THE POST OF RECORD ASSISTANT
HALL TICKET-CUM-IDENTITY SHEET

DATE	TIME	NAME OF THE EXAMINATION CENTER
14/9/25	2:30pm-4pm	Govt. Junior College, opp: Govt. Area Hospital Mulugu
NAME AND FULL POSTAL ADDRESS OF THE CANDIDATE (to be filled by the Candidate)		
Gurraju Pavan S/o. Gurraju madhukrishna H.No. 11-22-1941 Keshibugga, WARANGAL		
Signature of the Candidate <i>G. Pavan</i>		 Chief Administrative Officer Spl. Sessions Court for SC/ST Cases cum II ADJ. Court Warangal

SECRETARY
DISTRICT LEGAL SERVICES AUTHORITY,
MULUGU

DUPLICATE

DISTRICT LEGAL SERVICES AUTHORITY - MULUGU
WRITTEN TEST FOR THE POST OF RECORD ASSISTANT
HALL TICKET-CUM-IDENTITY SHEET 24170769

DATE	TIME	NAME OF THE EXAMINATION CENTER
14/9/25	2:30pm-4pm	Govt. Junior College, opp: Govt. Area Hospital Mulugu
NAME AND FULL POSTAL ADDRESS OF THE CANDIDATE (to be filled by the Candidate)		
Gurraju Pavan S/o. Gurraju madhukrishna H.No. 11-22-1941 Keshibugga, WARANGAL		
Signature of the Candidate <i>G. Pavan</i>		 Chief Administrative Officer Spl. Sessions Court for SC/ST Cases cum II ADJ. Court Warangal

SECRETARY
DISTRICT LEGAL SERVICES AUTHORITY,
MULUGU

ORIGINAL

REGD. No.: 24170770

DISTRICT LEGAL SERVICES AUTHORITY, MULUGU
WRITTEN TEST FOR THE POST OF Record Assistant
HALL TICKET-CUM-IDENTITY SHEET

DATE	TIME	NAME OF THE EXAMINATION CENTER
14/9/25	2:30pm-4pm	Govt. Junior College, opp: Govt. Area Hospital Mulugu
NAME AND FULL POSTAL ADDRESS OF THE CANDIDATE (to be filled by the Candidate)		
Banath Mahesh babu Gt. Papaiah pally, Govindaraopeta, 506347		
Signature of the Candidate		

MEDICAL OFFICER
Mandal, PHC
Govindaraopeta
Dist: Mulugu

SECRETARY
DISTRICT LEGAL SERVICES AUTHORITY,
MULUGU

DUPLICATE

DISTRICT LEGAL SERVICES AUTHORITY : MULUGU
WRITTEN TEST FOR THE POST OF Record Assistant
HALL TICKET-CUM-IDENTITY SHEET 24170770

DATE	TIME	NAME OF THE EXAMINATION CENTER
14/9/25	2:30pm-4pm	Govt. Jr. College, opp: Govt. Area Hospital Mulugu
NAME AND FULL POSTAL ADDRESS OF THE CANDIDATE (to be filled by the Candidate)		
Banath Mahesh babu Gt. Papaiah pally, Govindaraopeta, 506347		
Signature of the Candidate		

MEDICAL OFFICER
Mandal, PHC
Govindaraopeta
Dist: Mulugu

SECRETARY
DISTRICT LEGAL SERVICES AUTHORITY,
MULUGU

ORIGINAL

REGD. No.: 24170771

DISTRICT LEGAL SERVICES AUTHORITY : MULUGU
 WRITTEN TEST FOR THE POST OF Record Assistant
 HALL TICKET-CUM-IDENTITY SHEET

DATE	TIME	NAME OF THE EXAMINATION CENTER
14/9/25	2:30pm-4pm	Govt. Junior College, opp:- Govt. Area Hospital mulugu
NAME AND FULL POSTAL ADDRESS OF THE CANDIDATE		
(to be filled by the Candidate) 9949069211		
Yalamarthi Sandhya Rani (D/o) Yamuna vill:- Govindarao Pet street:- Wilson dist:- mulugu. Pincode:- 506344.		
Signature of the Candidate		Y. Sandhya Rani



Dr. PRASHANT NAIK PORTIKA
 MBBS, DNB (Gen. Surgeon)
 Regd. No. 66776
 Civil Asst. Surgeon.

SECRETARY
 DISTRICT LEGAL SERVICES AUTHORITY,
 MULUGU

DUPLICATE

DISTRICT LEGAL SERVICES AUTHORITY : MULUGU
 WRITTEN TEST FOR THE POST OF Record Assistant.

HALL TICKET-CUM-IDENTITY SHEET 24170771

DATE	TIME	NAME OF THE EXAMINATION CENTER
14/9/25	2:30pm-4pm	(to be filled by the Candidate) Govt. Junior College, opp:- Govt. Area Hospital mulugu
NAME AND FULL POSTAL ADDRESS OF THE CANDIDATE		
(to be filled by the Candidate) 9949069211		
Yalamarthi Sandhya Rani (D/o) Yamuna vill:- Govindarao Pet street:- Wilson dist:- mulugu Pincode:- 506344		
Signature of the Candidate		Y. Sandhya Rani



Dr. PRASHANT NAIK PORTIKA
 MBBS, DNB (GEN. Surgeon)
 Regd. No. 66776
 Civil Asst. Surgeon

SECRETARY
 DISTRICT LEGAL SERVICES AUTHORITY,
 MULUGU.

ORIGINAL

REGD. No.: 24170772

DISTRICT LEGAL SERVICES AUTHORITY : MULUGU
WRITTEN TEST FOR THE POST OF Peroid Assistant
HALL TICKET-CUM-IDENTITY SHEET

DATE	TIME	NAME OF THE EXAMINATION CENTER
14/9/25	2:30pm-4pm	Gort. Junior College opp: Gort. Area Hospital mulugu
NAME AND FULL POSTAL ADDRESS OF THE CANDIDATE		
(to be filled by the Candidate)		
Hno- 5-143, Ramesh Azmeera St. Balpa vill Laxmidewisel. near Venkatarapur Dist: mulugu pin 506345		
Signature of the Candidate		



Office
gudem
Dist:

SECRETARY

DISTRICT LEGAL SERVICES AUTHORITY,
MULUGU

DUPLICATE

DISTRICT LEGAL SERVICES AUTHORITY : MULUGU
WRITTEN TEST FOR THE POST OF Peroid Assistant

HALL TICKET-CUM-IDENTITY SHEET

DATE	TIME	NAME OF THE EXAMINATION CENTER
14/9/25	2:30pm-4pm	Gort. Junior College opp: Gort. Area Hospital mulugu
NAME AND FULL POSTAL ADDRESS OF THE CANDIDATE		
(to be filled by the Candidate)		
Hno- 5-143, Ramesh Azmeera St. Balpa vill Laxmidewisel. near Venkatarapur Dist: mulugu		
Signature of the Candidate		



Office
gudem
Dist:

SECRETARY

DISTRICT LEGAL SERVICES AUTHORITY,
MULUGU

ORIGINAL

REGD. No.: 24170773

DISTRICT LEGAL SERVICES AUTHORITY: MULUGU
 WRITTEN TEST FOR THE POST OF RECORD ASSISTANT
 HALL TICKET-CUM-IDENTITY SHEET

DATE	TIME	NAME OF THE EXAMINATION CENTER
14/9/25	2:30pm-4pm	Govt. Junior College opp. Govt. Area Hospital mulugu
NAME AND FULL POSTAL ADDRESS OF THE CANDIDATE		
(to be filled by the Candidate)		
BURRA KARTHIK, S/O. BAKKATHA H.No. 9-91, STREET: PAKKURUGADDA, VIL: JANGODU MON: BHUPALPALLY DIST: JAYASHANKAR BHUPAL- -PALLY, 506169, TELANGANA, 501210339		
Signature of the Candidate		 INDARAPU SHIVAKUMAR B.Com, LL.B Asst. Government Pleader Jayashankar Bhupalpally Dist.

SECRETARY
 DISTRICT LEGAL SERVICES AUTHORITY,
 JAYASHANKAR MULUGU

DUPLICATE

DISTRICT LEGAL SERVICES AUTHORITY: MULUGU
 WRITTEN TEST FOR THE POST OF RECORD ASSISTANT
 HALL TICKET-CUM-IDENTITY SHEET

DATE	TIME	NAME OF THE EXAMINATION CENTER
14/9/25	2:30pm-4pm	Govt. Junior College, opp. Govt. Area Hospital mulugu
NAME AND FULL POSTAL ADDRESS OF THE CANDIDATE		
(to be filled by the Candidate)		
BURRA KARTHIK, S/O. BAKKATHA H.No. 9-91, STREET: PAKKURUGADDA, VIL: JANGODU MON: BHUPALPALLY, DIST: JAYASHANKAR BHUPAL- -PALLY, 506169, TELANGANA, 501210339		
Signature of the Candidate		 INDARAPU SHIVAKUMAR LL.B, LL.B Asst. Government Pleader Jayashankar Bhupalpally Dist.

SECRETARY
 DISTRICT LEGAL SERVICES AUTHORITY,
 MULUGU

ORIGINAL

REGD. No.:

24170774

DISTRICT LEGAL SERVICES AUTHORITY - MULUGU
WRITTEN TEST FOR THE POST OF RECORD ASSISTANT
HALL TICKET-CUM-IDENTITY SHEET

DATE	TIME	NAME OF THE EXAMINATION CENTER
14/9/25	2:30pm-4pm	Govt. Junior College opp:- Govt. Area Hospital Mulugu
NAME AND FULL POSTAL ADDRESS OF THE CANDIDATE		
(to be filled by the Candidate)		
BANOTHU RAJU S/O SARAIAM. H.No. 2-47, BANGLAPALLY VILLAGE KONDAPUR (Pdt) GHANPUR MANDAL JAYAMANKAR, BHUPALAPALLY Dst.		
B Raju		
Signature of the Candidate		

Assistant Government Pleader,
Junior civil Judge Court
Mulugu, Cell: 8897710160

SECRETARY
DISTRICT LEGAL SERVICES AUTHORITY,
MULUGU

DUPLICATE

DISTRICT LEGAL SERVICES AUTHORITY : MULUGU
WRITTEN TEST FOR THE POST OF RECORD ASSISTANT

HALL TICKET-CUM-IDENTITY SHEET

24170774

DATE	TIME	NAME OF THE EXAMINATION CENTER
14/9/25	2:30pm-4pm	Govt. Junior College opp:- Govt. Area Hospital Mulugu
NAME AND FULL POSTAL ADDRESS OF THE CANDIDATE		
(to be filled by the Candidate)		
BANOTHU RAJU S/O SARAIAM H.No. 2-47, BANGLAPALLY VILLAGE KONDAPUR (Pdt) GHANPUR MANDAL JAYAMANKAR BHUPALAPALLY Dst		
B Raju		
Signature of the Candidate		

CHANDRAIAH
Assistant Government Pleader,
Junior civil Judge Court
Mulugu, Cell: 8897710160

SECRETARY
DISTRICT LEGAL SERVICES AUTHORITY,
MULUGU.

ORIGINAL

REGD. No.: 24170775

DISTRICT LEGAL SERVICES AUTHORITY, MULUGU
WRITTEN TEST FOR THE POST OF Record Assistant
HALL TICKET-CUM-IDENTITY SHEET

DATE	TIME	NAME OF THE EXAMINATION CENTER
14/9/25	2:30pm-4pm	Racharla saritha
NAME AND FULL POSTAL ADDRESS OF THE CANDIDATE		
(to be filled by the Candidate)		
Racharla saritha D/o chandramouli; H.NO. 1-143. V: Devanagar M&D:- mulugu pincode: 506349		
Signature of the Candidate		R. Saritha



B. CHANDRAIAH
Junior Civil Judge Court
Mulugu, Cell: 8807710160

Govt. Junior College
opp: Govt. Area Hospital
mulugu

SECRETARY
DISTRICT LEGAL SERVICES AUTHORITY,
MULUGU

DUPLICATE

DISTRICT LEGAL SERVICES AUTHORITY : MULUGU
WRITTEN TEST FOR THE POST OF Record Assistant
HALL TICKET-CUM-IDENTITY SHEET

DATE	TIME	NAME OF THE EXAMINATION CENTER
14/9/25	2:30pm-4pm	Racharla saritha
NAME AND FULL POSTAL ADDRESS OF THE CANDIDATE		
(to be filled by the Candidate)		
Racharla saritha D/o chandramouli H.NO. 1-143 V: Devanagar M&D:- mulugu pin code: 506349		
Signature of the Candidate		R. Saritha



B. CHANDRAIAH
Junior Civil Judge Court
Mulugu, Cell: 8807710160

Govt. Junior College
opp: Govt. Area Hospital
mulugu

SECRETARY
DISTRICT LEGAL SERVICES AUTHORITY,
MULUGU

ORIGINAL

REGD. No.:

24170776

DISTRICT LEGAL SERVICES AUTHORITY : MULUGU
WRITTEN TEST FOR THE POST OF RECORD ASSISTANT
HALL TICKET-CUM-IDENTITY SHEET

DATE	TIME	NAME OF THE EXAMINATION CENTER
14/9/25	2:30pm-4pm	Porika Divyavani
NAME AND FULL POSTAL ADDRESS OF THE CANDIDATE		
(to be filled by the Candidate)		
PORIKA DIVYAVANI D/O. SOM SINGH H.No. 2-47 BANGLAPALLY VILLAGE KONDAPUR (POST) GHANPUREM MANDAL JAYASHANKAR, BHOPALAPALLY PIN 506345		
P. Divyavani Signature of the Candidate		 B. CHANDRAIAH Assistant Government Pleader Junior civil Judge Court Mulugu Cell- 8897710160

Govt. Junior College
Opp: Govt. Area Hospital
Mulugu

SECRETARY

DISTRICT LEGAL SERVICES AUTHORITY,
MULUGU

DUPLICATE

DISTRICT LEGAL SERVICES AUTHORITY : MULUGU
WRITTEN TEST FOR THE POST OF RECORD ASSISTANT
HALL TICKET-CUM-IDENTITY SHEET

DATE	TIME	NAME OF THE EXAMINATION CENTER
14/9/25	2:30pm-4pm	Porika Divyavani
NAME AND FULL POSTAL ADDRESS OF THE CANDIDATE		
(to be filled by the Candidate)		
PORIKA DIVYAVANI D/O. SOM SINGH H.No. 2-47 BANGLAPALLY VILLAGE KONDAPUR (POST) GHANPUREM MANDAL JAYASHANKAR, BHOPALAPALLY PIN 506345		
P. Divyavani Signature of the Candidate		 B. CHANDRAIAH Assistant Government Pleader Junior civil Judge Court Mulugu Cell- 8897710160

Govt. Junior College
Opp: Govt. Area Hospital
Mulugu

SECRETARY

DISTRICT LEGAL SERVICES AUTHORITY,
MULUGU.

ORIGINAL

REGD. No.: 24170777

DISTRICT LEGAL SERVICES AUTHORITY : MULUGU
WRITTEN TEST FOR THE POST OF RECORD ASSISTANT
HALL TICKET-CUM-IDENTITY SHEET

DATE	TIME	NAME OF THE EXAMINATION CENTER
14/9/25	2:30pm-4pm	Govt. Junior College opp: Govt. Area Hospital Mulugu
NAME AND FULL POSTAL ADDRESS OF THE CANDIDATE (to be filled by the Candidate)		
BHUKYA MOUNIKA H.No: 1-277/7/c vill: MULUGU MDL: MULUGU DIST: MULUGU PINCODE: 506343		
 Medical Officer PHC Rainigudem Mulugu Dist:		
Signature of the Candidate		

SECRETARY
DISTRICT LEGAL SERVICES AUTHORITY,
MULUGU

DUPLICATE

DISTRICT LEGAL SERVICES AUTHORITY : MULUGU
WRITTEN TEST FOR THE POST OF RECORD ASSISTANT
HALL TICKET-CUM-IDENTITY SHEET

24170777

DATE	TIME	NAME OF THE EXAMINATION CENTER
14/9/25	2:30pm-4pm	Govt. Junior College opp: Govt. Area Hospital Mulugu
NAME AND FULL POSTAL ADDRESS OF THE CANDIDATE (to be filled by the Candidate)		
BHUKYA MOUNIKA H.No: 1-277/7/c vill: MULUGU MDL: MULUGU DIST: MULUGU PINCODE: 506343		
 Medical Officer PHC Rainigudem Mulugu Dist:		
Signature of the Candidate		

SECRETARY
DISTRICT LEGAL SERVICES AUTHORITY,
MULUGU.

ORIGINAL

REGD. No.: 24170778

DISTRICT LEGAL SERVICES AUTHORITY : MULUGU
WRITTEN TEST FOR THE POST OF Record Assistant
HALL TICKET-CUM-IDENTITY SHEET

DATE	TIME	NAME OF THE EXAMINATION CENTER
14/9/25	2:30pm-4pm	Govt. Junior College, opp. Govt. Area Hospital Mulugu
NAME AND FULL POSTAL ADDRESS OF THE CANDIDATE		
(to be filled by the Candidate)		
A2MEARA NITHIN RAJ 12-1 RANGA RAO PALLY. MULUGU - MULUGU		
A. Nithin raj Signature of the Candidate		A. Nithin raj



SECRETARY
DISTRICT LEGAL SERVICES AUTHORITY,
MULUGU

DUPLICATE

DISTRICT LEGAL SERVICES AUTHORITY : MULUGU
WRITTEN TEST FOR THE POST OF Record Assistant

HALL TICKET-CUM-IDENTITY SHEET

24170778

DATE	TIME	NAME OF THE EXAMINATION CENTER
14/9/25	2:30pm-4pm	(to be filled by the Candidate) Govt. Junior College opp. Govt. Area Hospital Mulugu
NAME AND FULL POSTAL ADDRESS OF THE CANDIDATE		
(to be filled by the Candidate)		
A2MEARA NITHIN RAJ 12-1 RANGA RAO PALLY. MULUGU. MULUGU		
A. Nithin raj Signature of the Candidate		A. Nithin raj



SECRETARY
DISTRICT LEGAL SERVICES AUTHORITY,
MULUGU.

ORIGINAL

REGD. No.: 24170779

DISTRICT LEGAL SERVICES AUTHORITY : MULUGU
WRITTEN TEST FOR THE POST OF Record Assistant
HALL TICKET-CUM-IDENTITY SHEET

DATE	TIME	NAME OF THE EXAMINATION CENTER
14/9/25	2:30pm-4pm	Govt. Junior College, opp: Govt. Area Hospital Mulugu
NAME AND FULL POSTAL ADDRESS OF THE CANDIDATE		
(to be filled by the Candidate)		
Jatoth Ramesh s/o Amarsingh CVS Balaji Nagar Dist, Mulugu C/o, Govindarao pet pin, 506347 Post, Lakhnawaram		
Signature of the Candidate		 Principal Government Medical College Mulugu.

SECRETARY
DISTRICT LEGAL SERVICES AUTHORITY,
MULUGU

DUPLICATE

DISTRICT LEGAL SERVICES AUTHORITY : MULUGU
WRITTEN TEST FOR THE POST OF Record Assistant

HALL TICKET-CUM-IDENTITY SHEET

24170779

DATE	TIME	NAME OF THE EXAMINATION CENTER
14/9/25	2:30pm-4pm	Govt. Junior College, opp: Govt. Area Hospital Mulugu
NAME AND FULL POSTAL ADDRESS OF THE CANDIDATE		
(to be filled by the Candidate)		
Jatoth Ramesh s/o Amarsingh CVS Balaji Nagar Dist, Mulugu C/o, Govindarao pet pin, 506347 Post, Lakhnawaram		
Signature of the Candidate		 Principal Government Medical College Mulugu.

SECRETARY
DISTRICT LEGAL SERVICES AUTHORITY,
MULUGU.

ORIGINAL

REGD. No.: 24170780

DISTRICT LEGAL SERVICES AUTHORITY : MULUGU
WRITTEN TEST FOR THE POST OF RECORD ASSISTANT.
HALL TICKET-CUM-IDENTITY SHEET

DATE	TIME	NAME OF THE EXAMINATION CENTER
14/9/25	2:30pm-4pm	Gort. Junior College opp. Gort. Area Hospital Mulugu
NAME AND FULL POSTAL ADDRESS OF THE CANDIDATE		
(to be filled by the Candidate)		
Vasampally Madhu S. Ailumalla, H.No: 1-236, SC-colony, Vil: Papiahally, Mdl: Venkatapur, Dist: Mulugu, 506343		
Signature of the Candidate		 Primary Assistant Surgeon, Primary Veterinary Center Vill: L... Mdl: Venkatapur, Dist: Mulugu

SECRETARY
DISTRICT LEGAL SERVICES AUTHORITY,
MULUGU

DUPLICATE

DISTRICT LEGAL SERVICES AUTHORITY : MULUGU
WRITTEN TEST FOR THE POST OF RECORD ASSISTANT

HALL TICKET-CUM-IDENTITY SHEET 24170780

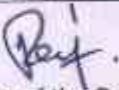
DATE	TIME	NAME OF THE EXAMINATION CENTER
14/9/25	2:30pm-4pm	Gort. Junior College opp. Gort. Area Hospital Mulugu
NAME AND FULL POSTAL ADDRESS OF THE CANDIDATE		
(to be filled by the Candidate)		
Vasampally Madhu S. Ailumalla, H.No: 1-236, SC-colony, Vil: Papiahally, Mdl: Venkatapur, Dist: Mulugu, 506343.		
Signature of the Candidate		 Primary Assistant Surgeon, Primary Veterinary Center Vill: L... Mdl: Venkatapur, Dist: Mulugu

SECRETARY
DISTRICT LEGAL SERVICES AUTHORITY,
MULUGU.

ORIGINAL

REGD. No.: 24170781

DISTRICT LEGAL SERVICES AUTHORITY : MULUGU
WRITTEN TEST FOR THE POST OF Record Assistant
HALL TICKET-CUM-IDENTITY SHEET

DATE	TIME	NAME OF THE EXAMINATION CENTER
14/9/25	2:30pm-4pm	Govt. Junior College, OPP. Govt. Area Hospital, Mulugu.
NAME AND FULL POSTAL ADDRESS OF THE CANDIDATE		
(to be filled by the Candidate)		
Sabhavat Rajanna 6-124, ST. Colony, Jeevantharao Pally, Mulugu - 506343		
Signature of the Candidate		 2PHS Mdr. & Dist.
		

SECRETARY
DISTRICT LEGAL SERVICES AUTHORITY,
MULUGU

DUPLICATE

DISTRICT LEGAL SERVICES AUTHORITY : MULUGU
WRITTEN TEST FOR THE POST OF Record Assistant

HALL TICKET-CUM-IDENTITY SHEET 24170781

DATE	TIME	NAME OF THE EXAMINATION CENTER
14/9/25	2:30pm-4pm	Govt. Junior College, OPP. Govt. Area Hospital, Mulugu.
NAME AND FULL POSTAL ADDRESS OF THE CANDIDATE		
(to be filled by the Candidate)		
Sabhavat Rajanna 6-124, ST. Colony, Jeevantharao Pally, Mulugu - 506343.		
Signature of the Candidate		 2PHS Mdr. & Dist.
		

SECRETARY
DISTRICT LEGAL SERVICES AUTHORITY,
MULUGU.

ORIGINAL

REGD. No.:

24170782

DISTRICT LEGAL SERVICES AUTHORITY, MULUGU
WRITTEN TEST FOR THE POST OF ~~Mulugu~~ Record Assistant
HALL TICKET-CUM-IDENTITY SHEET

DATE	TIME	NAME OF THE EXAMINATION CENTER
14/9/25	2:30pm-4pm	Govt. Junior College, opp- Govt. Area Hospital, Mulugu.
NAME AND FULL POSTAL ADDRESS OF THE CANDIDATE		
(to be filled by the Candidate)		
Barnath. Kishore s/o swarnilal H.No 5-112/2, Laxmidivipet Venkatapur, mulugu - 506345		
Signature of the Candidate	 S. R. NIVAS BANO Lecturer in Mechanical Engineering Govt. Polytechnic Warangal	



SECRETARY

DISTRICT LEGAL SERVICES AUTHORITY,
MULUGU

DUPLICATE

DISTRICT LEGAL SERVICES AUTHORITY, MULUGU
WRITTEN TEST FOR THE POST OF ~~Mulugu~~ Record Assistant

HALL TICKET-CUM-IDENTITY SHEET

24170782

DATE	TIME	NAME OF THE EXAMINATION CENTER
14/9/25	2:30pm-4pm	Govt. Junior College, opp- Govt. Area Hospital, Mulugu.
NAME AND FULL POSTAL ADDRESS OF THE CANDIDATE		
(to be filled by the Candidate)		
Barnath. Kishore s/o swarnilal H.No 5-112/2, Laxmidivipet Venkatapur, mulugu - 506345		
Signature of the Candidate	 S. R. NIVAS BANO Lecturer in Mechanical Engineering Govt. Polytechnic Warangal	



SECRETARY

DISTRICT LEGAL SERVICES AUTHORITY,
MULUGU

ORIGINAL

REGD. No.: 24170783

DISTRICT LEGAL SERVICES AUTHORITY : HANUMAKONDA
WRITTEN TEST FOR THE POST OF Record Assistant
HALL TICKET-CUM-IDENTITY SHEET

DATE	TIME	NAME OF THE EXAMINATION CENTER
14/9/25	2:30PM-4PM	Govt. Junior College, opp:- Govt. Area Hospital, Mulugu.
NAME AND FULL POSTAL ADDRESS OF THE CANDIDATE		
(to be filled by the Candidate)		
Musipala. praveeth S/o. M. Prabhakar R/o. 5-18/A Govardhanpalli, Raghunathpally Jangoan (D) Pincode:- 506301		
m. praveeth Signature of the Candidate		 Director R Dept. Hanumakonda

SECRETARY,
DISTRICT LEGAL SERVICES AUTHORITY,
HANUMAKONDA Mulugu

DUPLICATE

DISTRICT LEGAL SERVICES AUTHORITY : HANUMAKONDA Mulugu
WRITTEN TEST FOR THE POST OF Record Assistant
HALL TICKET-CUM-IDENTITY SHEET 24170783

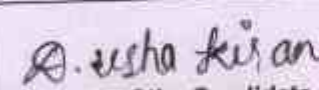
DATE	TIME	NAME OF THE EXAMINATION CENTER
14/9/25	2:30PM-4PM	Govt. Junior College, opp:- Govt. Area Hospital, Mulugu.
NAME AND FULL POSTAL ADDRESS OF THE CANDIDATE		
(to be filled by the Candidate)		
Musipala. praveeth S/o. M. Prabhakar R/o. 5-18/A, Govardhanpalli, Raghunathpally Jangoan (D) Pincode:- 506301		
m. praveeth Signature of the Candidate		 Dist. Ha.

ORIGINAL

REGD. No.:

24170784

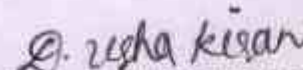
DISTRICT LEGAL SERVICES AUTHORITY: MULUGU
WRITTEN TEST FOR THE POST OF RECORD ASSISTANT
HALL TICKET-CUM-IDENTITY SHEET

DATE	TIME	NAME OF THE EXAMINATION CENTER
14/9/25	2:30PM-4PM	Govt Junior College, OPPI - Govt. Area Hospital Mulugu.
NAME AND FULL POSTAL ADDRESS OF THE CANDIDATE		
(to be filled by the Candidate)		
DODDI USHA KIRAN, S/O. KISTAIAH R/O. H. NO.3-9, VENKATRAOPALLY (C), CHITYAL (V) & (M), JAYASHANKAR BHUPALPALLY DIST., - 506356, TELANGANA STATE. 9703030115.		
Signature of the Candidate		 KOMARAJA K. K. S. Kumar Asst. P. M. P. Hanamkonda
 U. Usha Kiran		

SECRETARY
DISTRICT LEGAL SERVICES AUTHORITY,
MULUGU

DUPLICATE

DISTRICT LEGAL SERVICES AUTHORITY: MULUGU
WRITTEN TEST FOR THE POST OF RECORD ASSISTANT
HALL TICKET-CUM-IDENTITY SHEET 24170784

DATE	TIME	NAME OF THE EXAMINATION CENTER
14/9/25	2:30PM-4PM	Govt. Junior College, OPPI - Govt. Area Hospital, Mulugu.
NAME AND FULL POSTAL ADDRESS OF THE CANDIDATE		
(to be filled by the Candidate)		
DODDI USHA KIRAN, S/O. KISTAIAH R/O. H. NO.3-9, VENKATRAOPALLY (C), CHITYAL (V) & (M), JAYASHANKAR BHUPALPALLY DIST., - 506356, TELANGANA STATE. 9703030115.		
Signature of the Candidate		 K. K. S. Kumar Public Prosecutor, Hanamkonda District
 U. Usha Kiran		

SECRETARY
DISTRICT LEGAL SERVICES AUTHORITY,
MULUGU

ORIGINAL

REGD. No.:

24170785

DISTRICT LEGAL SERVICES AUTHORITY : MULUGU
 WRITTEN TEST FOR THE POST OF Record Assistant
 HALL TICKET-CUM-IDENTITY SHEET

DATE	TIME	NAME OF THE EXAMINATION CENTER
14/9/25	2:30PM-4PM	Gout Junior College, Opp:- Gout. Area Hospital Mulugu.
NAME AND FULL POSTAL ADDRESS OF THE CANDIDATE		
(to be filled by the Candidate)		
BANOTHU VINODKUMAR, S/o. KISHAN #1-120, Vill/Post: BANDARUPALLY Mandal & Dist: MULUGU, PIN: 506343 Cell. No: 9491949323		
 Signature of the Candidate		 MR. BANOTHU VINODKUMAR TPO Dist: MULUGU

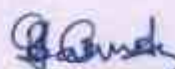
SECRETARY
 DISTRICT LEGAL SERVICES AUTHORITY,
 MULUGU

DUPLICATE

DISTRICT LEGAL SERVICES AUTHORITY : MULUGU
 WRITTEN TEST FOR THE POST OF Record Assistant

HALL TICKET-CUM-IDENTITY SHEET

24170785

DATE	TIME	NAME OF THE EXAMINATION CENTER
14/9/25	2:30PM-4PM	Gout Jr College, Opp:- Gout. Area Hospital Mulugu.
NAME AND FULL POSTAL ADDRESS OF THE CANDIDATE		
(to be filled by the Candidate)		
BANOTHU VINODKUMAR, S/o. KISHAN #1-120, Vill/Post: BANDARUPALLY Mandal & Dist: MULUGU, PIN: 506343 Cell. No: 9491949323		
 Signature of the Candidate		 Surgeon DISTRICT MULUGU

SECRETARY
 DISTRICT LEGAL SERVICES AUTHORITY,
 MULUGU.

ORIGINAL

REGD. No.: 24170786

DISTRICT LEGAL SERVICES AUTHORITY : MULUGU
WRITTEN TEST FOR THE POST OF Record Assistant
HALL TICKET-CUM-IDENTITY SHEET

DATE	TIME	NAME OF THE EXAMINATION CENTER
~~14/12/24~~ 14/9/25	~~10:00 AM~~ 2:30pm-4pm	~~District Court Complex, mulugu~~ Gout. Junior College opp: Gout. Area Hospital, mulugu
NAME AND FULL POSTAL ADDRESS OF THE CANDIDATE		
(to be filled by the Candidate)		
S. Swapna, 3-70, Devagiri Patnam, Pathipalle, mulugu 506352		
Signature of the Candidate		 CIVIL ASSTANT MULUGU DISTRICT HOSPITAL
Swapna		

SECRETARY
DISTRICT LEGAL SERVICES AUTHORITY,
MULUGU

DUPLICATE

DISTRICT LEGAL SERVICES AUTHORITY : MULUGU
WRITTEN TEST FOR THE POST OF Record Assistant
HALL TICKET-CUM-IDENTITY SHEET

DATE	TIME	NAME OF THE EXAMINATION CENTER
~~14/12/24~~ 14/9/25	~~10:00 AM~~ 2:30pm-4pm	~~District Court Complex, mulugu~~ Gout. Junior College opp: Gout. Area Hospital, mulugu
NAME AND FULL POSTAL ADDRESS OF THE CANDIDATE		
(to be filled by the Candidate)		
S. Swapna, 3-70, Devagiri Patnam, Pathipalle, mulugu 506352		
Signature of the Candidate		 CIVIL ASSTANT MULUGU DISTRICT HOSPITAL
Swapna		

SECRETARY
DISTRICT LEGAL SERVICES AUTHORITY,
MULUGU.

ORIGINAL

REGD. No.: 24170787

DISTRICT LEGAL SERVICES AUTHORITY : MULUGU WRITTEN TEST FOR THE POST OF Record Assistant HALL TICKET-CUM-IDENTITY SHEET

DATE	TIME	NAME OF THE EXAMINATION CENTER
14/9/25	2:30PM-4PM	Govt. Junior College, opp:- Govt. Area Hospital Mulugu.
NAME AND FULL POSTAL ADDRESS OF THE CANDIDATE		
(to be filled by the Candidate)		
Meka Pavani w/o. S. Phaneendra/Krishna Flat No:- 170A, Srinivasapuram colony Varasthaliparam, Rangareddy(D.T) 500070		
Signature of the Candidate M. Pavani		 Fast Track Special Judge for Trial of Sexual Rape and other offences Ranga Reddy District, at L.B. Nagar

SECRETARY
DISTRICT LEGAL SERVICES AUTHORITY,
MULUGU

DUPLICATE

DISTRICT LEGAL SERVICES AUTHORITY : MULUGU WRITTEN TEST FOR THE POST OF Record Assistant

HALL TICKET-CUM-IDENTITY SHEET

DATE	TIME	NAME OF THE EXAMINATION CENTER
14/9/25	2:30PM -4PM	Govt. Junior College, opp:- Govt. Area Hospital, Mulugu.
NAME AND FULL POSTAL ADDRESS OF THE CANDIDATE		
(to be filled by the Candidate)		
Meka Pavani w/o. S. Phaneendrakrishna Plot No:- 170A, Srinivasapuram colony Varasthaliparam, Rangareddy(D.T) 500070		
Signature of the Candidate M. Pavani		 Fast Track Special Judge for Trial of Sexual Rape and other offences Ranga Reddy District, at L.B. Nagar

SECRETARY
DISTRICT LEGAL SERVICES AUTHORITY,
MULUGU.

ORIGINAL

REGD. No.: 24170788

DISTRICT LEGAL SERVICES AUTHORITY MULUGU WRITTEN TEST FOR THE POST OF RECORD ASSISTANT HALL TICKET-CUM-IDENTITY SHEET

DATE	TIME	NAME OF THE EXAMINATION CENTER
14/9/25	2:30PM-4PM	Govt. Junior College, Opp:- Govt. Area Hospital, Mulugu.
NAME AND FULL POSTAL ADDRESS OF THE CANDIDATE		
(to be filled by the Candidate)		
Arke. Moumika D/o Krishna H.No. 12-291, Akulavari Chapur Mdl. Etnu Nagaram. Dist. mulugu		
Signature of the Candidate		Ar. Moumika



Dist: mulugu

SECRETARY
DISTRICT LEGAL SERVICES AUTHORITY,
MULUGU

DUPLICATE

DISTRICT LEGAL SERVICES AUTHORITY : MULUGU WRITTEN TEST FOR THE POST OF RECORD Assistant

HALL TICKET-CUM-IDENTITY SHEET

24170788

DATE	TIME	NAME OF THE EXAMINATION CENTER
14/9/25	2:30PM-4PM	Govt. Junior College, Opp:- Govt. Area Hospital, Mulugu.
NAME AND FULL POSTAL ADDRESS OF THE CANDIDATE		
(to be filled by the Candidate)		
Arke. Moumika, D/o. Krishna H.No. 12-291, Akulavari Chapur Mdl. Etnu Nagaram. Dist. mulugu		
Signature of the Candidate		



Dist: mulugu

SECRETARY
DISTRICT LEGAL SERVICES AUTHORITY,
MULUGU.

ORIGINAL

REGD. No.: 24170789

DISTRICT LEGAL SERVICES AUTHORITY : MULUGU
WRITTEN TEST FOR THE POST OF Record Assistant
HALL TICKET-CUM-IDENTITY SHEET

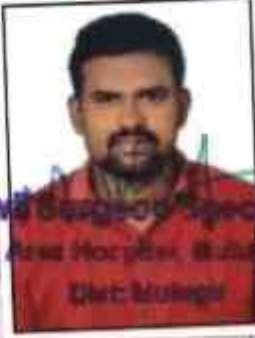
DATE	TIME	NAME OF THE EXAMINATION CENTER
14/9/25	2:30PM-4PM	Govt. Junior College, Opp. Govt. Area Hospital Mulugu.
NAME AND FULL POSTAL ADDRESS OF THE CANDIDATE (to be filled by the Candidate)		
Yalam. Prakash S/O Baby H. No. 2-4 Kothuru (ST) Shapally Mdl. Ethunagarani Dist. Mulugu		
Signature of the Candidate		 C. H. S. Specialist Area Hospital, Mulugu, Dist. Mulugu

SECRETARY
DISTRICT LEGAL SERVICES AUTHORITY,
MULUGU

DUPLICATE

DISTRICT LEGAL SERVICES AUTHORITY : MULUGU
WRITTEN TEST FOR THE POST OF Record Assistant

HALL TICKET-CUM-IDENTITY SHEET 24170789

DATE	TIME	NAME OF THE EXAMINATION CENTER
14/9/25	2:30PM-4PM	(to be filled by the Candidate) Govt. Junior College, Opp. Govt. Area Hospital Mulugu.
NAME AND FULL POSTAL ADDRESS OF THE CANDIDATE (to be filled by the Candidate)		
Yalam. Prakash S/O. Baby H. No. 2-4 Kothuru (ST) Shapally Mdl. Ethunagarani Dist. Mulugu		
Signature of the Candidate		 C. H. S. Specialist Area Hospital, Mulugu, Dist. Mulugu

SECRETARY
DISTRICT LEGAL SERVICES AUTHORITY,
MULUGU.

ORIGINAL

REGD. No.:

24170790

DISTRICT LEGAL SERVICES AUTHORITY : MULUGU WRITTEN TEST FOR THE POST OF RECORD ASSISTANT HALL TICKET-CUM-IDENTITY SHEET

DATE	TIME	NAME OF THE EXAMINATION CENTER
14/9/25	2:30PM-4PM	Govt. Junior College, OPP- Govt. Area Hospital, Mulugu.
NAME AND FULL POSTAL ADDRESS OF THE CANDIDATE		
(to be filled by the Candidate)		
H.No-14-28, Butaram Village, Etunagaram mandal, mulugu (Dist) Pin:-506165 YALAM VISHWAMAHAESH		
Signature of the Candidate		 PRINCIPAL GOVT. JUNIOR COLLEGE MAHADEVPUR DIST. J.S. MUPALDALLY.

SECRETARY

DISTRICT LEGAL SERVICES AUTHORITY,
MULUGU

DUPLICATE

DISTRICT LEGAL SERVICES AUTHORITY : MULUGU WRITTEN TEST FOR THE POST OF RECORD ASSISTANT

HALL TICKET-CUM-IDENTITY SHEET

24170790

DATE	TIME	NAME OF THE EXAMINATION CENTER
14/9/25	2:30PM-4PM	Govt. Junior College, OPP- Govt. Area Hospital, Mulugu.
NAME AND FULL POSTAL ADDRESS OF THE CANDIDATE		
(to be filled by the Candidate)		
H.No-14-28, Butaram Village, Etunagaram mandal, mulugu (Dist) pin:-506165 YALAM VISHWAMAHAESH		
Signature of the Candidate		 PRINCIPAL GOVT. JUNIOR COLLEGE MAHADEVPUR DIST. J.S. MUPALDALLY.

SECRETARY

DISTRICT LEGAL SERVICES AUTHORITY,
MULUGU.

ORIGINAL

REGD. No.:

24170791

DISTRICT LEGAL SERVICES AUTHORITY, MULUGU
WRITTEN TEST FOR THE POST OF Record Assistant
HALL TICKET-CUM-IDENTITY SHEET

DATE	TIME	NAME OF THE EXAMINATION CENTER
14/9/25	2:30PM-4PM	Govt. Junior College, Opp: Govt. Area Hospital, Mulugu.
NAME AND FULL POSTAL ADDRESS OF THE CANDIDATE		
(to be filled by the Candidate) Radharapu Shiva Koti R/o. H.no: 15, 173/A, S.D. Road Back side of Court, Narsampet-506132 Warangal (D), Cell: 9948934924		
Signature of the Candidate		 Civil Surgeon Specialist Narsampet Warangal

SECRETARY
DISTRICT LEGAL SERVICES AUTHORITY,
MULUGU

DUPLICATE

DISTRICT LEGAL SERVICES AUTHORITY : MULUGU
WRITTEN TEST FOR THE POST OF Record Assistant

HALL TICKET-CUM-IDENTITY SHEET

24170791

DATE	TIME	NAME OF THE EXAMINATION CENTER
14/9/25	2:30PM-4PM	(to be filled by the Candidate) Govt. Junior College, Opp: Govt. Area Hospital Mulugu.
NAME AND FULL POSTAL ADDRESS OF THE CANDIDATE		
(to be filled by the Candidate) Radharapu Shiva Koti R/o. H.no: 15-173/A, S.D. Road Back side of Court, Narsampet-506132, Warangal (D), Cell: 9948934924.		
Signature of the Candidate		 Civil Surgeon Specialist Narsampet Warangal

SECRETARY
DISTRICT LEGAL SERVICES AUTHORITY,
MULUGU.

ORIGINAL

REGD. No.: 24170792

DISTRICT LEGAL SERVICES AUTHORITY : MULUGU
WRITTEN TEST FOR THE POST OF RECORD ASSISTANT
HALL TICKET-CUM-IDENTITY SHEET

DATE	TIME	NAME OF THE EXAMINATION CENTER
14/9/25	2:30PM-4PM	Govt. Junior College, CPPI- Govt. Area Hospital Mulugu.
NAME AND FULL POSTAL ADDRESS OF THE CANDIDATE (to be filled by the Candidate)		
JAKKI SUMAN S/O JAKKI SAMBAIAH H.NO. 1-69, GOLLONIPALLY ARCHANAPALLY, NALLABELLI PIN-506399 - (Cell-917720382)		
Signature of the Candidate		 JAKKI SUMAN S/O JAKKI SAMBAIAH Junior Civil Judge Court Mulugu, Cell-8897710160

SECRETARY
DISTRICT LEGAL SERVICES AUTHORITY,
MULUGU

DUPLICATE

DISTRICT LEGAL SERVICES AUTHORITY : MULUGU
WRITTEN TEST FOR THE POST OF Record Assistant

HALL TICKET-CUM-IDENTITY SHEET

24170792

DATE	TIME	NAME OF THE EXAMINATION CENTER
14/9/25	2:30PM-4PM	Govt. Junior College, CPPI- Govt. Area Hospital Mulugu.
NAME AND FULL POSTAL ADDRESS OF THE CANDIDATE (to be filled by the Candidate)		
JAKKI SUMAN S/O J. SAMBAIAH H.NO. 1-69, GOLLONIPALLY, ARCHANAPALLY, NALLABELLI PIN-506399 Cell-917720382		
Signature of the Candidate		 JAKKI SUMAN S/O J. SAMBAIAH Junior Civil Judge Court Mulugu, Cell-8897710160

SECRETARY
DISTRICT LEGAL SERVICES AUTHORITY,
MULUGU

ORIGINAL

REGD. No.: 24170793

DISTRICT LEGAL SERVICES AUTHORITY MULUGU
WRITTEN TEST FOR THE POST OF Record Assistant
HALL TICKET-CUM-IDENTITY SHEET

DATE	TIME	NAME OF THE EXAMINATION CENTER
14/9/25	2:30PM-4PM	Govt. Junior College, oppl. Govt. Area Hospital, Mulugu.
NAME AND FULL POSTAL ADDRESS OF THE CANDIDATE		
(to be filled by the Candidate)		
R. Pavani, 15-8-838, Mamatha medical college back side, Vivekananda Nagar, Khammam - 507002 Telangana.		
Signature of the Candidate		R. Pavani.



Hujur Nagar.

SECRETARY

DISTRICT LEGAL SERVICES AUTHORITY,
MULUGU

DUPLICATE

DISTRICT LEGAL SERVICES AUTHORITY : MULUGU
WRITTEN TEST FOR THE POST OF Record Assistant

HALL TICKET-CUM-IDENTITY SHEET 24170793

DATE	TIME	NAME OF THE EXAMINATION CENTER
(to be filled by the Candidate)		
15/10/2024, 10:30 AM		District court complex, Mulugu.
14/9/2025	2:30-4PM	Govt. Junior College, Mulugu
NAME AND FULL POSTAL ADDRESS OF THE CANDIDATE		
(to be filled by the Candidate)		
R. Pavani, 15-8-838, Mamatha medical college back side, Vivekananda Nagar, Khammam - 507002 Telangana.		
Signature of the Candidate		R. Pavani.



Hujur Nagar.

SECRETARY

DISTRICT LEGAL SERVICES AUTHORITY,
MULUGU.

ORIGINAL

REGD. No.: 24170794

DISTRICT LEGAL SERVICES AUTHORITY : MULUGU
WRITTEN TEST FOR THE POST OF RECORD ASSISTANT
HALL TICKET-CUM-IDENTITY SHEET

DATE	TIME	NAME OF THE EXAMINATION CENTER
14/9/25	2:30PM-4PM	Govt Junior College, Opp: Govt. Area Hospital, Mulugu
NAME AND FULL POSTAL ADDRESS OF THE CANDIDATE		
(to be filled by the Candidate)		
GOGU. SRIKANTH S/O. GOGU. RAVI 2-76, LAXMIDEVIPETA, VENKATAPUR, MULUGU, 506 345		
Signature of the Candidate		

SECRETARY
DISTRICT LEGAL SERVICES AUTHORITY,
MULUGU

DUPLICATE

DISTRICT LEGAL SERVICES AUTHORITY : MULUGU
WRITTEN TEST FOR THE POST OF RECORD ASSISTANT
HALL TICKET-CUM-IDENTITY SHEET 24170794

DATE	TIME	NAME OF THE EXAMINATION CENTER
14/9/25	2:30PM-4PM	Govt Junior College, Opp: Govt Area Hospital, Mulugu
NAME AND FULL POSTAL ADDRESS OF THE CANDIDATE		
(to be filled by the Candidate)		
GOGU. SRIKANTH, S/O. GOGU. RAVI 2-76, LAXMIDEVIPETA, VENKATAPUR, MULUGU, 506 345		
Signature of the Candidate		

SECRETARY
DISTRICT LEGAL SERVICES AUTHORITY,
MULUGU.

ORIGINAL

REGD. No.: 24170795

DISTRICT LEGAL SERVICES AUTHORITY: Mulugu
 WRITTEN TEST FOR THE POST OF Record Assistant Record Assistant
 HALL TICKET-CUM-IDENTITY SHEET

DATE	TIME	NAME OF THE EXAMINATION CENTER
14/9/25	2:30pm-4pm	Govt. Junior College, OPPI- Govt. Area Hospital Mulugu.
NAME AND FULL POSTAL ADDRESS OF THE CANDIDATE		
(to be filled by the Candidate)		
Cherukupalli Sathesh Kumar s/o Jidikalalu HNO: 6-30 multhayudem (vi) Khammam (M) Khammam, 50763		
Ch. Sathesh Kumar Signature of the Candidate		 District Divisional Officer Khammam.

SECRETARY
 DISTRICT LEGAL SERVICES AUTHORITY,
Mulugu

DUPLICATE

DISTRICT LEGAL SERVICES AUTHORITY: Mulugu
 WRITTEN TEST FOR THE POST OF Record Assistant
 HALL TICKET-CUM-IDENTITY SHEET 24170795

DATE	TIME	NAME OF THE EXAMINATION CENTER
14/9/25	2:30pm-4pm	(to be filled by the Candidate) Govt. Junior College, OPPI- Govt. Area Hospital Mulugu.
NAME AND FULL POSTAL ADDRESS OF THE CANDIDATE		
(to be filled by the Candidate)		
Cherukupalli Sathesh Kumar s/o Jidikalalu HNO: 6-30, multhayudem (vi) Khammam Rural (M) Khammam, 50763		
Ch. Sathesh Kumar Signature of the Candidate		 District Divisional Officer Khammam.

SECRETARY
 DISTRICT LEGAL SERVICES AUTHORITY,
Mulugu

ORIGINAL

REGD. No.: 24170796

DISTRICT LEGAL SERVICES AUTHORITY : MULUGU
WRITTEN TEST FOR THE POST OF RECORD ASSISTANT
HALL TICKET-CUM-IDENTITY SHEET

DATE	TIME	NAME OF THE EXAMINATION CENTER
14/9/25	2:30pm-4pm	Govt. Junior College, OPP: Govt. Area Hospital, Mulugu.
NAME AND FULL POSTAL ADDRESS OF THE CANDIDATE		
(to be filled by the Candidate)		
VADDEPALLY PRASHANTH SR RAMACHANDER H.No. 4 - 20/2 village BUDDARAM, Mandal: GULANAPURAM, DISTRICT: JAYASHANKAR RAMPURAM Pin 506345. mobile: 7382520963		
V. Prashanth Signature of the Candidate		 dar

Ghanpur (M) Mandal

SECRETARY
DISTRICT LEGAL SERVICES AUTHORITY,
MULUGU

DUPLICATE

DISTRICT LEGAL SERVICES AUTHORITY : MULUGU
WRITTEN TEST FOR THE POST OF RECORD ASSISTANT

HALL TICKET-CUM-IDENTITY SHEET 24170796

DATE	TIME	NAME OF THE EXAMINATION CENTER
14/9/25	2:30pm-4pm	Govt. Junior College, OPP: Govt. Area Hospital, Mulugu.
NAME AND FULL POSTAL ADDRESS OF THE CANDIDATE		
(to be filled by the Candidate)		
VADDEPALLY PRASHANTH SR RAMACHANDER H. No. 4 - 20/2 village BUDDARAM Mandal: GULANAPURAM, DISTRICT: JAYASHANKAR RAMPURAM Pin 506345. mobile: 7382520963 / 8006338352		
V. Prashanth Signature of the Candidate		 sildar

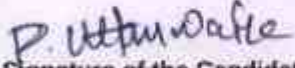
Ghanpur (M) Mandal

SECRETARY
DISTRICT LEGAL SERVICES AUTHORITY,
MULUGU.

ORIGINAL

REGD. No.: 24170797

DISTRICT LEGAL SERVICES AUTHORITY : MULUGU
WRITTEN TEST FOR THE POST OF RECORD ASSISTANT
HALL TICKET-CUM-IDENTITY SHEET

DATE	TIME	NAME OF THE EXAMINATION CENTER
14/9/25	2:30PM-4PM	Govt - Junior College, Opp:- Govt. Area Hospital, Mulugu.
NAME AND FULL POSTAL ADDRESS OF THE CANDIDATE		
(to be filled by the Candidate)		
PORIKA UTTAM NAIK V:- Laxmidvipet-5-75/4 (Hauda) m:- Venkatapur D:- Mulugu, Pin:- 506345		
 Signature of the Candidate		 Medical Officer PHC NAILABELLY Dist: WARANGAL

SECRETARY

DISTRICT LEGAL SERVICES AUTHORITY,
MULUGU**DUPLICATE**DISTRICT LEGAL SERVICES AUTHORITY : MULUGU
WRITTEN TEST FOR THE POST OF RECORD ASSISTANT.

HALL TICKET-CUM-IDENTITY SHEET 24170797

DATE	TIME	NAME OF THE EXAMINATION CENTER
14/9/25	2:30PM-4PM	(to be filled by the Candidate) Govt - Junior College, Opp:- Govt. Area Hospital, Mulugu.
NAME AND FULL POSTAL ADDRESS OF THE CANDIDATE		
(to be filled by the Candidate)		
PORIKA UTTAM NAIK V:- Laxmidvipet (-Hauda), m:- Venkatapur D:- Mulugu, Pin:- 506345		
 Signature of the Candidate		 Medical Officer PHC NAILABELLY Dist: WARANGAL

SECRETARY

DISTRICT LEGAL SERVICES AUTHORITY,
MULUGU.

ORIGINAL

REGD. No.: 24170798

DISTRICT LEGAL SERVICES AUTHORITY, MULUGU WRITTEN TEST FOR THE POST OF Record Assistant HALL TICKET-CUM-IDENTITY SHEET

DATE	TIME	NAME OF THE EXAMINATION CENTER
14/9/25	2:30PM-4PM	Govt. Junior College, OPPI-Goul. Area Hospital, Mulugu.
NAME AND FULL POSTAL ADDRESS OF THE CANDIDATE		
(to be filled by the Candidate)		
SINGIREDDY RAVINDER, S/O. JAIPAL H.No: 1-88 - Chivapuram, Eknaganam - mulugu - 506165		
Signature of the Candidate		 Public Prosecutor Sessions Judge Court Mulugu District, At Kukatpally.

SECRETARY
DISTRICT LEGAL SERVICES AUTHORITY,
MULUGU

DUPLICATE

DISTRICT LEGAL SERVICES AUTHORITY : MULUGU WRITTEN TEST FOR THE POST OF Record Assistant

HALL TICKET-CUM-IDENTITY SHEET 24170798

DATE	TIME	NAME OF THE EXAMINATION CENTER
~~15/12/24~~ 10:30AM		(to be filled by the Candidate)
14/9/25	2:30PM-4PM	~~District Complex, mulugu,~~ Govt. Junior College, OPPI-Goul. Area Hospital,
NAME AND FULL POSTAL ADDRESS OF THE CANDIDATE		
(to be filled by the Candidate)		
SINGIREDDY RAVINDER, S/O. JAIPAL H.No: 1-88, Shivapuram, Eknaganam, mulugu - 506165		
Signature of the Candidate		 Public Prosecutor Sessions Judge Court Mulugu District, At Kukatpally.

SECRETARY
DISTRICT LEGAL SERVICES AUTHORITY,
MULUGU.

ORIGINAL

REGD. No.: 24170799

DISTRICT LEGAL SERVICES AUTHORITY : MULUGU
WRITTEN TEST FOR THE POST OF RECORD ASSISTANT
HALL TICKET-CUM-IDENTITY SHEET

DATE	TIME	NAME OF THE EXAMINATION CENTER
14/9/25	2:30pm-4pm	Govt. Junior College, Opp: Govt. Area Hospital, Mulugu.
NAME AND FULL POSTAL ADDRESS OF THE CANDIDATE		
(to be filled by the Candidate)		
KURAKULA VINOD. HOUSE NO 2-130 JAKARAM. MD. DIST. MULUGU, TELANGANA. 506343		
Signature of the Candidate		K. Dey



Assistant Executive Engineer
MB Intra SS Thadvai (M)

SECRETARY
DISTRICT LEGAL SERVICES AUTHORITY,
MULUGU

DUPLICATE

DISTRICT LEGAL SERVICES AUTHORITY : MULUGU
WRITTEN TEST FOR THE POST OF RECORD ASSISTANT

HALL TICKET-CUM-IDENTITY SHEET

DATE	TIME	NAME OF THE EXAMINATION CENTER
14/9/25	2:30pm-4pm	Govt. Junior College, Opp: Govt. Area Hospital, Mulugu.
NAME AND FULL POSTAL ADDRESS OF THE CANDIDATE		
(to be filled by the Candidate)		
KURAKULA VINOD. H.NO 2-130, JAKARAM MD. DIST. MULUGU, TELANGANA. 506343.		
Signature of the Candidate		K. Dey



Assistant Executive Engineer
MB Intra SS Thadvai (M)

SECRETARY
DISTRICT LEGAL SERVICES AUTHORITY,
MULUGU.

ORIGINAL

REGD. No.: 24170800

DISTRICT LEGAL SERVICES AUTHORITY : MULUGU WRITTEN TEST FOR THE POST OF Record Assistant HALL TICKET-CUM-IDENTITY SHEET

DATE	TIME	NAME OF THE EXAMINATION CENTER
14/9/25	2:30PM-4PM	Govt. Junior College, OPP- Govt. Area Hospital, Mulugu.
NAME AND FULL POSTAL ADDRESS OF THE CANDIDATE		
(to be filled by the Candidate)		
Mamidala Ravalika, Mohammed Gouspally, MULUGU (506349), MULUGU, 2-36 (House no), Telangana		Medical Officer PHC NALLABELLI Dist: VVNR
Signature of the Candidate		M. Ravalika

SECRETARY

DISTRICT LEGAL SERVICES AUTHORITY,
MULUGU

DUPLICATE

DISTRICT LEGAL SERVICES AUTHORITY : MULUGU WRITTEN TEST FOR THE POST OF Record Assistant

HALL TICKET-CUM-IDENTITY SHEET 24170800

DATE	TIME	NAME OF THE EXAMINATION CENTER
14/9/25	2:30PM-4PM	Govt. Junior College, OPP- Govt. Area Hospital, Mulugu.
NAME AND FULL POSTAL ADDRESS OF THE CANDIDATE		
(to be filled by the Candidate)		
Mamidala Ravalika, Mohammed Gouspally, MULUGU (506349), MULUGU, 2-36 (House no), Telangana		Medical Officer PHC NALLABELLI Dist: VVNR
Signature of the Candidate		M. Ravalika

SECRETARY

DISTRICT LEGAL SERVICES AUTHORITY,
MULUGU.

ORIGINAL

REGD. No.: 24170801

DISTRICT LEGAL SERVICES AUTHORITY : MULUGU
 WRITTEN TEST FOR THE POST OF Record Assistant
 HALL TICKET-CUM-IDENTITY SHEET

DATE	TIME	NAME OF THE EXAMINATION CENTER
14/9/25	2:30pm-4pm	Govt. Junior College, opp: Govt. Area Hospital Mulugu
NAME AND FULL POSTAL ADDRESS OF THE CANDIDATE		
(to be filled by the Candidate)		
Palthiya Mahesh S/O. Palthiya Damodar, H.No's 5-106/34, Subhash Chandrabase colony, Kamalapuram, Mangapet, Mulugu. Telangana - 506172.		
 Signature of the Candidate		 MEDICAL OFFICER Mandal: PHC Govindaraopeta Dist: Mulugu.


 SECRETARY
 DISTRICT LEGAL SERVICES AUTHORITY,
 MULUGU

DUPLICATE

DISTRICT LEGAL SERVICES AUTHORITY : MULUGU
 WRITTEN TEST FOR THE POST OF Record Assistant

HALL TICKET-CUM-IDENTITY SHEET 24170801

DATE	TIME	NAME OF THE EXAMINATION CENTER
14/9/25	2:30pm-4pm	Govt. Junior College, opp: Govt. Area Hospital Mulugu
NAME AND FULL POSTAL ADDRESS OF THE CANDIDATE		
(to be filled by the Candidate)		
Palthiya Mahesh S/O. Palthiya Damodar, H.No's 5-106/34, Subhash Chandrabase colony, Kamalapuram, Mangapet, Mulugu. Telangana - 506172.		
 Signature of the Candidate		 MEDICAL OFFICER Mandal: PHC Govindaraopeta Dist: Mulugu.


 SECRETARY
 DISTRICT LEGAL SERVICES AUTHORITY,
 MULUGU.

ORIGINAL

REGD. No.: 24170802

DISTRICT LEGAL SERVICES AUTHORITY : MULUGU
WRITTEN TEST FOR THE POST OF Record Assistant
HALL TICKET-CUM-IDENTITY SHEET

DATE	TIME	NAME OF THE EXAMINATION CENTER
14/9/25	2:30pm-4pm	Govt. Junior College opp: Govt. Appa Hospital Mulugu
NAME AND FULL POSTAL ADDRESS OF THE CANDIDATE		
(to be filled by the Candidate)		
Kolakanu. Sreenu ; Sp/Narsaiah (vi) palampet, (M) Venkatapur (Dist) Mulugu, Pincode: 506345		
K. Sreenu Signature of the Candidate		

SECRETARY
DISTRICT LEGAL SERVICES AUTHORITY,
MULUGU

DUPLICATE

DISTRICT LEGAL SERVICES AUTHORITY : MULUGU
WRITTEN TEST FOR THE POST OF Record Assistant

HALL TICKET-CUM-IDENTITY SHEET 24170802

DATE	TIME	NAME OF THE EXAMINATION CENTER
14/9/25	2:30pm-4pm	Govt. Junior College opp: Govt. Appa Hospital Mulugu
NAME AND FULL POSTAL ADDRESS OF THE CANDIDATE		
(to be filled by the Candidate)		
Kolakanu. Sreenu ; Sp/Narsaiah (vi) palampet, (M) Venkatapur (Dist) Mulugu, Pincode: 506345		
K. Sreenu Signature of the Candidate		

SECRETARY
DISTRICT LEGAL SERVICES AUTHORITY,
MULUGU

ORIGINAL

REGD. No.: 24170803

DISTRICT LEGAL SERVICES AUTHORITY : MULUGU
WRITTEN TEST FOR THE POST OF Record Assistant
HALL TICKET-CUM-IDENTITY SHEET

DATE	TIME	NAME OF THE EXAMINATION CENTER
14/9/25	2:30pm-4pm	Gout. Junior College opp: Gout. Area Hospital Mulugu
NAME AND FULL POSTAL ADDRESS OF THE CANDIDATE		
(to be filled by the Candidate)		
GOTTEMUKKALA RAJU S/o. GOTTEMUKKALA POSHETTI. H.NO: 9-16/1, Chalva, Govindaraopet, Mulugu. Pincode: 506344		
 Inspector of Police DSS Mulugu Dist		
G. Raju Signature of the Candidate		

SECRETARY

DISTRICT LEGAL SERVICES AUTHORITY,
MULUGU

DUPLICATE

DISTRICT LEGAL SERVICES AUTHORITY : MULUGU
WRITTEN TEST FOR THE POST OF Record Assistant

HALL TICKET-CUM-IDENTITY SHEET 24170803

DATE	TIME	NAME OF THE EXAMINATION CENTER
14/9/25	2:30pm-4pm	Gout. Junior College opp: Gout. Area Hospital Mulugu
NAME AND FULL POSTAL ADDRESS OF THE CANDIDATE		
(to be filled by the Candidate)		
GOTTEMUKKALA RAJU S/o. GOTTEMUKKALA POSHETTI. H.NO: 9-16/1, Chalva, Govindaraopet, Mulugu. Pincode: 506344		
 Inspector of Police DSS Mulugu Dist		
G. Raju Signature of the Candidate		

SECRETARY

DISTRICT LEGAL SERVICES AUTHORITY,
MULUGU.

ORIGINAL

REGD. No.: 24170804

DISTRICT LEGAL SERVICES AUTHORITY : MULUGU
WRITTEN TEST FOR THE POST OF **RECORD ASSISTANT**
HALL TICKET-CUM-IDENTITY SHEET

DATE	TIME	NAME OF THE EXAMINATION CENTER
14/9/25	2:30pm-4pm	Govt. Junior College, Opp: Govt. Area Hospital Mulugu
NAME AND FULL POSTAL ADDRESS OF THE CANDIDATE (to be filled by the Candidate)		
Mitka Granga H.No: 3-28, Ramalayam Street, Mulugu Mulugu		
Granga Signature of the Candidate		



SECRETARY
DISTRICT LEGAL SERVICES AUTHORITY,
MULUGU

DUPLICATE

DISTRICT LEGAL SERVICES AUTHORITY : MULUGU
WRITTEN TEST FOR THE POST OF **RECORD ASSISTANT**
HALL TICKET-CUM-IDENTITY SHEET 24170804

DATE	TIME	NAME OF THE EXAMINATION CENTER
14/9/25	2:30pm-4pm	Govt. Junior College, Opp: Govt. Area Hospital Mulugu
NAME AND FULL POSTAL ADDRESS OF THE CANDIDATE (to be filled by the Candidate)		
Mitka Granga H.No: 3-28, Ramalayam Street, Mulugu Mulugu		
Granga Signature of the Candidate		



SECRETARY
DISTRICT LEGAL SERVICES AUTHORITY,
MULUGU

ORIGINAL

REGD. No.: 24170805

DISTRICT LEGAL SERVICES AUTHORITY - MULUGU
WRITTEN TEST FOR THE POST OF Record Assistant
HALL TICKET-CUM-IDENTITY SHEET

DATE	TIME	NAME OF THE EXAMINATION CENTER
14/9/25	2:30pm-4pm	Govt. Junior College, opp. Govt. Area Hospital Mulugu.
NAME AND FULL POSTAL ADDRESS OF THE CANDIDATE		
(to be filled by the Candidate)		
AJMEERA YASHWANTH RAJ A.no: 3-31, Near Grampanchayat, Mulugu Dist Mulugu		
Signature of the Candidate		A. yashwanth Raj



SECRETARY
DISTRICT LEGAL SERVICES AUTHORITY,
MULUGU

DUPLICATE

DISTRICT LEGAL SERVICES AUTHORITY : MULUGU
WRITTEN TEST FOR THE POST OF Record assistant

HALL TICKET-CUM-IDENTITY SHEET 24170805

DATE	TIME	NAME OF THE EXAMINATION CENTER
14/9/25	2:30pm-4pm	(to be filled by the Candidate) Govt. Junior College, opp. Govt. Area, Hospital Mulugu
NAME AND FULL POSTAL ADDRESS OF THE CANDIDATE		
(to be filled by the Candidate)		
AJMEERA YASHWANTH RAJ A.no: 3-31, Near Grampanchayat, Mulugu Dist Mulugu.		
Signature of the Candidate		A. yashwanth Raj



ORIGINAL

REGD. No.: 24170806

DISTRICT LEGAL SERVICES AUTHORITY : MULUGU
WRITTEN TEST FOR THE POST OF RECORD ASSISTANT.
HALL TICKET-CUM-IDENTITY SHEET

DATE	TIME	NAME OF THE EXAMINATION CENTER
14/9/25	2:30pm-4pm	Govt. Junior College opp: Govt. Area Hospital Mulugu
NAME AND FULL POSTAL ADDRESS OF THE CANDIDATE (to be filled by the Candidate)		
KONUPULA ADITHYA YADAV Rt. H.No-13-187/1, Palebepally (V) Mulugu (M) & District - 506343		
Signature of the Candidate		K. Adithya



SECRETARY
DISTRICT LEGAL SERVICES AUTHORITY,
MULUGU

DUPLICATE

DISTRICT LEGAL SERVICES AUTHORITY : MULUGU
WRITTEN TEST FOR THE POST OF RECORD ASSISTANT.

HALL TICKET-CUM-IDENTITY SHEET

24170806

DATE	TIME	NAME OF THE EXAMINATION CENTER
14/9/25	2:30pm-4pm	Govt. Junior College opp: Govt. Area Hospital Mulugu
NAME AND FULL POSTAL ADDRESS OF THE CANDIDATE (to be filled by the Candidate)		
KONUPULA ADITHYA YADAV, Rt. H.No-13-187/1, Palebepally (V) Mulugu (M) & District. 506343.		
Signature of the Candidate		K. Adithya



SECRETARY
DISTRICT LEGAL SERVICES AUTHORITY,
MULUGU.

ORIGINAL

REGD. No.: 24170807

DISTRICT LEGAL SERVICES AUTHORITY : MULUGU WRITTEN TEST FOR THE POST OF Record Assistant HALL TICKET-CUM-IDENTITY SHEET

DATE	TIME	NAME OF THE EXAMINATION CENTER
14/9/25	2:30pm-4pm	Govt. Junior College opp: Govt. Area Hospital Mulugu
NAME AND FULL POSTAL ADDRESS OF THE CANDIDATE <u>Vishavath Srinu</u> (to be filled by the Candidate)		
H.NO. 1-24 1/2, mulugu weavers colony mulugu dist mulugu pin 506343 (cell no 7013937876)		
Signature of the Candidate		 Srinu

SECRETARY
DISTRICT LEGAL SERVICES AUTHORITY,
MULUGU

DUPLICATE

DISTRICT LEGAL SERVICES AUTHORITY : MULUGU WRITTEN TEST FOR THE POST OF Record Assistant

HALL TICKET-CUM-IDENTITY SHEET 24170807

DATE	TIME	NAME OF THE EXAMINATION CENTER
14/9/25	2:30pm-4pm	(to be filled by the Candidate) Govt. Junior College, opp: Govt. Area Hospital Mulugu
NAME AND FULL POSTAL ADDRESS OF THE CANDIDATE <u>Vishavath Srinu</u> (to be filled by the Candidate)		
H.NO. 1-24 1/2, mulugu weavers colony mulugu dist mulugu pin 506343 (cell no 7013937876)		
Signature of the Candidate		 Srinu

SECRETARY
DISTRICT LEGAL SERVICES AUTHORITY,
MULUGU.

ORIGINAL

REGD. No.: 24170808

DISTRICT LEGAL SERVICES AUTHORITY : MULUGU
 WRITTEN TEST FOR THE POST OF Record Assistant
 HALL TICKET-CUM-IDENTITY SHEET

DATE	TIME	NAME OF THE EXAMINATION CENTER
14/9/25	2:30pm-4pm	Govt. Junior College, opp: Govt. Area Hospital mulugu
NAME AND FULL POSTAL ADDRESS OF THE CANDIDATE		
(to be filled by the Candidate)		
KADAPAKA VAMSHI 10-117, Premnagar, mulugu, Wavangal 506343.		
K.vamshi Signature of the Candidate		

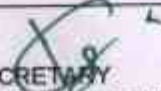

 SECRETARY
 DISTRICT LEGAL SERVICES AUTHORITY,
 MULUGU

DUPLICATE

DISTRICT LEGAL SERVICES AUTHORITY : MULUGU
 WRITTEN TEST FOR THE POST OF Record Assistant

HALL TICKET-CUM-IDENTITY SHEET 24170808

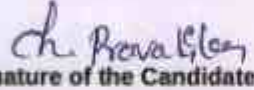
DATE	TIME	NAME OF THE EXAMINATION CENTER
14/9/25	2:30pm-4pm	(to be filled by the Candidate) Govt. Junior College, opp:- Govt. Area Hospital mulugu
NAME AND FULL POSTAL ADDRESS OF THE CANDIDATE		
(to be filled by the Candidate)		
KADAPAKA VAMSHI 10-117, Premnagar, mulugu, Wavangal, 506343.		
K.vamshi Signature of the Candidate		


 SECRETARY
 DISTRICT LEGAL SERVICES AUTHORITY,
 MULUGU.

ORIGINAL

REGD. No.: 24170809

DISTRICT LEGAL SERVICES AUTHORITY : MULUGU WRITTEN TEST FOR THE POST OF RECORD ASSISTANT HALL TICKET-CUM-IDENTITY SHEET

DATE	TIME	NAME OF THE EXAMINATION CENTER
14/9/25	2:30pm-4pm	Govt Junior College, opp: Govt Area Hospital mulugu
NAME AND FULL POSTAL ADDRESS OF THE CANDIDATE		
(to be filled by the Candidate)		
CHENNURI PRAVALIKA, D/o VENKANNA POST: PASRANAGARAM. MAN: GOVINDARAO SET DIST: MULUGU - PIN: 506 347 H No: 1-147		
Signature of the Candidate		 Mandana Educational Officer M.P. Govindaraopeta, Dist. Mulugu-T.S.
		

SECRETARY
DISTRICT LEGAL SERVICES AUTHORITY,
MULUGU

DUPLICATE

DISTRICT LEGAL SERVICES AUTHORITY : MULUGU WRITTEN TEST FOR THE POST OF RECORD ASSISTANT

HALL TICKET-CUM-IDENTITY SHEET 24170809

DATE	TIME	NAME OF THE EXAMINATION CENTER
14/9/25	2:30pm-4pm	(to be filled by the Candidate) Govt Junior College opp: Govt Area Hospital mulugu
NAME AND FULL POSTAL ADDRESS OF THE CANDIDATE		
(to be filled by the Candidate)		
CHENNURI PRAVALIKA D/o VENKANNA Post: Pasranagaram, Man: Govindaraopeta Dist: Mulugu - PIN: 506 347 H No: 1-147		
Signature of the Candidate		 Mandana Educational Officer M.P. Govindaraopeta, Dist. Mulugu-T.S.
		

SECRETARY
DISTRICT LEGAL SERVICES AUTHORITY,
MULUGU.

ORIGINAL

REGD. No.: 24170810

DISTRICT LEGAL SERVICES AUTHORITY : MULUGU
WRITTEN TEST FOR THE POST OF RECORD ASSISTANT
HALL TICKET-CUM-IDENTITY SHEET

DATE	TIME	NAME OF THE EXAMINATION CENTER
14/9/25	2:30pm-4pm	Govt. Junior College, opp: Govt. Area Hospital Mulugu
NAME AND FULL POSTAL ADDRESS OF THE CANDIDATE		
(to be filled by the Candidate)		
PORIKA SONUNAYAK V:- Laxmidolevipet, m:- Venkatapur D:- Mulugu, pin:- 506345		
P. Sonunayak Signature of the Candidate		 Medical Officer PHC NALLA BELLY Dist: WARANGAL

SECRETARY
DISTRICT LEGAL SERVICES AUTHORITY,
MULUGU

DUPLICATE

DISTRICT LEGAL SERVICES AUTHORITY : MULUGU
WRITTEN TEST FOR THE POST OF RECORD ASSISTANT

HALL TICKET-CUM-IDENTITY SHEET 24170810

DATE	TIME	NAME OF THE EXAMINATION CENTER
14/9/25	2:30pm-4pm	(to be filled by the Candidate) Govt. Junior College opp: Govt. Area Hospital Mulugu
NAME AND FULL POSTAL ADDRESS OF THE CANDIDATE		
(to be filled by the Candidate)		
PORIKA SONUNAYAK V:- Laxmidolevipet, m:- Venkatapur D:- Mulugu, pin:- 506345		
P. Sonunayak Signature of the Candidate		 Medical Officer PHC NALLA BELLY Dist: WARANGAL

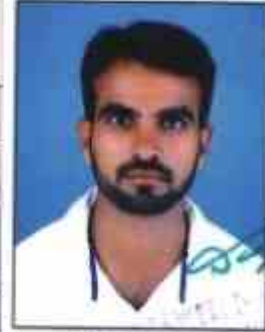
SECRETARY
DISTRICT LEGAL SERVICES AUTHORITY,
MULUGU.

ORIGINAL

REGD. No.: 24170811

DISTRICT LEGAL SERVICES AUTHORITY :MULUGU
WRITTEN TEST FOR THE POST OF RECORD ASSISTANT
HALL TICKET-CUM-IDENTITY SHEET

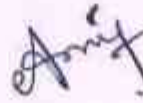
DATE	TIME	NAME OF THE EXAMINATION CENTER
14/9/25	2:30pm-4pm	Gout. Junior College Opp:- Gout. Area Hospital Mulugu
NAME AND FULL POSTAL ADDRESS OF THE CANDIDATE		
(to be filled by the Candidate)		
BOOKYA. ANILKUMAR S/K KISHAN H.NO:3-7/1 Vill:- Mallaiah pally Mdl: Venkatapur Dist: Mulugu. pin:-506345. Cell: 9949192275		
Signature of the Candidate		

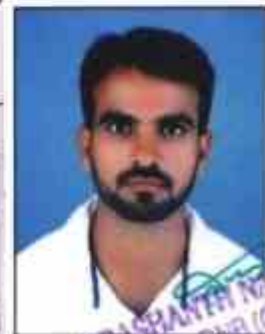


DR. P. S. SURESH
MDS, DNB (GEN. Surgery)
Regd. No. 186776
Civil Asst. Surgeon

SECRETARY
DISTRICT LEGAL SERVICES AUTHORITY,
MULUGU

DUPLICATEDISTRICT LEGAL SERVICES AUTHORITY : MULUGU
WRITTEN TEST FOR THE POST OF RECORD ASSISTANT
HALL TICKET-CUM-IDENTITY SHEET 24170811

DATE	TIME	NAME OF THE EXAMINATION CENTER
14/9/25	2:30pm-4pm	Gout. Junior College Opp:- Gout. Area Hospital Mulugu
NAME AND FULL POSTAL ADDRESS OF THE CANDIDATE		
(to be filled by the Candidate)		
BOOKYA. ANIL KUMAR S/K KISHAN H.NO:3-7/1 Vill:- Mallaiah pally, Mdl: Venkatapur Dist: Mulugu pin: 506345. Cell: 9949192275		
Signature of the Candidate		



DR. PRASHANTH NARAYAN
MDS, DNB (GEN. Surgeon)
Regd. No. 186776
Civil Asst. Surgeon

SECRETARY
DISTRICT LEGAL SERVICES AUTHORITY,
MULUGU.

ORIGINALREGD. No.: 24170812

DISTRICT LEGAL SERVICES AUTHORITY : MULUGU
 WRITTEN TEST FOR THE POST OF Record Assistant
 HALL TICKET-CUM-IDENTITY SHEET

DATE	TIME	NAME OF THE EXAMINATION CENTER
14/9/25	2:30pm-4pm	Govt. Junior College, opp: Govt. Area Hospital Mulugu
NAME AND FULL POSTAL ADDRESS OF THE CANDIDATE		
(to be filled by the Candidate)		
MOHAMMAD VASEEM AHRAM 6-23, GOVINDARAOPET, PIN: 506344 MNDL: GOVINDARAOPET DIS: MULUGU		
Md. Vaseem Ahram Signature of the Candidate		 School Complex Head Master Govt. H.S. GOVINDARAOPET, Dist: Mulugu - 506 344. Gazetted Head Master Govt. H.S. GOVINDARAOPET, Dist: Mulugu - 506 344.

SECRETARY

DISTRICT LEGAL SERVICES AUTHORITY,
 MULUGU

DUPLICATE

DISTRICT LEGAL SERVICES AUTHORITY : MULUGU
 WRITTEN TEST FOR THE POST OF Record Assistant

HALL TICKET-CUM-IDENTITY SHEET

DATE	TIME	NAME OF THE EXAMINATION CENTER
14/9/25	2:30pm-4pm	Govt. Junior College, opp: Govt. Area Hospital Mulugu
(to be filled by the Candidate)		
~~15-12-2024~~ ~~10:30AM~~ ~~DISTRICT COURT COMPLEX,~~ ~~MULUGU~~		
NAME AND FULL POSTAL ADDRESS OF THE CANDIDATE		
(to be filled by the Candidate)		
MOHAMMAD VASEEM AHRAM 6-23, GOVINDARAOPET, PIN: 506344 MNDL: GOVINDARAOPET DIS: MULUGU		
Md. Vaseem Ahram Signature of the Candidate		 Gazetted Head Master Govt. H.S. GOVINDARAOPET, Dist: Mulugu - 506 344.

SECRETARY

DISTRICT LEGAL SERVICES AUTHORITY,
 MULUGU.

ORIGINAL

REGD. No.: 24170813

DISTRICT LEGAL SERVICES AUTHORITY : MULUGU
WRITTEN TEST FOR THE POST OF Record Assistant
HALL TICKET-CUM-IDENTITY SHEET

DATE	TIME	NAME OF THE EXAMINATION CENT
14/9/25	2:30pm-4pm	Govt. Junior College opp: Govt. Area Hospital Mulugu
NAME AND FULL POSTAL ADDRESS OF THE CANDIDATE		
(to be filled by the Candidate)		
Gyara Ravali H: NO: 8-5-160, Nizampet, opp. Jammiband Khammam - 507001, Telangana B.		
Signature of the Candidate		 NURSING SUPERINTENDENT GRADE-II AREA HOSPITAL, WYRA KHAMMAM
		

SECRETARY
DISTRICT LEGAL SERVICES AUTHORITY,
MULUGU

DUPLICATE

DISTRICT LEGAL SERVICES AUTHORITY : MULUGU
WRITTEN TEST FOR THE POST OF Record Assistant

HALL TICKET-CUM-IDENTITY SHEET 24170813

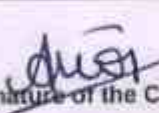
DATE	TIME	NAME OF THE EXAMINATION CENTER
14/9/25	2:30pm-4pm	(to be filled by the Candidate) Govt. Junior College opp: Govt. Area Hospital Mulugu
NAME AND FULL POSTAL ADDRESS OF THE CANDIDATE		
(to be filled by the Candidate)		
Gyara Ravali H: NO: 08-5-160, Nizampet, opp. Jammibanda Khammam - 507001, Telangana B.		
Signature of the Candidate		 NURSING SUPERINTENDENT GRADE-II AREA HOSPITAL, WYRA KHAMMAM
		

SECRETARY
DISTRICT LEGAL SERVICES AUTHORITY,
MULUGU.

ORIGINAL

REGD. No.: 24170814

DISTRICT LEGAL SERVICES AUTHORITY : MULUGU
WRITTEN TEST FOR THE POST OF Record Assistant
HALL TICKET-CUM-IDENTITY SHEET

DATE	TIME	NAME OF THE EXAMINATION CENTER
14/9/25	2:30pm-4pm	Govt. Junior College, opp Govt. Area Hospital Mulugu
NAME AND FULL POSTAL ADDRESS OF THE CANDIDATE		
(to be filled by the Candidate) MOHAMMED ABDUL MAZID S/o: MOHAMMED YAKUB PASTHA		
Signature of the Candidate 		 MEDICAL OFFICER TPHC- RAYANIGUDE Dist. <u>Mulugu</u>

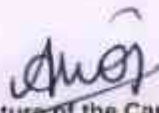
SECRETARY
DISTRICT LEGAL SERVICES AUTHORITY,
MULUGU

DUPLICATE

DISTRICT LEGAL SERVICES AUTHORITY : MULUGU
WRITTEN TEST FOR THE POST OF Record Assistant

HALL TICKET-CUM-IDENTITY SHEET

24170814

DATE	TIME	NAME OF THE EXAMINATION CENTER
14/9/25	2:30pm-4pm	Govt. Junior College, opp Govt. Area Hospital Mulugu
NAME AND FULL POSTAL ADDRESS OF THE CANDIDATE		
(to be filled by the Candidate) MOHAMMED ABDUL MAZID S/o: MOHAMMED YAKUB PASTHA		
Signature of the Candidate 		 MEDICAL OFFICER TPHC- RAYANIGUDE Dist: <u>Mulugu</u>

SECRETARY
DISTRICT LEGAL SERVICES AUTHORITY,
MULUGU.

ORIGINAL

REGD. No.:

24170815

DISTRICT LEGAL SERVICES AUTHORITY : MULUGU WRITTEN TEST FOR THE POST OF Record Assistant HALL TICKET-CUM-IDENTITY SHEET

DATE	TIME	NAME OF THE EXAMINATION CENTER
~~15/12/2024~~	~~10:30 AM~~	~~District court complex - MULUGU~~
14/9/25	2:30 PM - 4 PM	
NAME AND FULL POSTAL ADDRESS OF THE CANDIDATE		
(to be filled by the Candidate)		
SADADAH ALUVALA S/O KOMURADAH Vill: BANDARUPALLY HDE DIST. MULUGU PIN 506242		
A. Sadarah Signature of the Candidate		 District Welfare Officer Women, Children Disabled & Senior Citizens Dept., Mulugu District

Govt. Junior College
opp: Govt. Area Hospital
MULUGU

SECRETARY

DISTRICT LEGAL SERVICES AUTHORITY,
MULUGU

DUPLICATE

DISTRICT LEGAL SERVICES AUTHORITY : MULUGU WRITTEN TEST FOR THE POST OF Record Assistant

HALL TICKET-CUM-IDENTITY SHEET

DATE	TIME	NAME OF THE EXAMINATION CENTER
~~15/12/2024~~	~~10:30 AM~~	~~District court complex - MULUGU~~
14/9/25	2:30 PM - 4 PM	
NAME AND FULL POSTAL ADDRESS OF THE CANDIDATE		
(to be filled by the Candidate)		
SADADAH ALUVALA S/O KOMURADAH Vill: BANDARUPALLY HDE DIST. MULUGU PIN 506242		
A. Sadarah Signature of the Candidate		 District Welfare Officer Women, Children Disabled & Senior Citizens Dept., Mulugu District

Govt. Junior College
opp: Govt. Area Hospital
MULUGU

SECRETARY

DISTRICT LEGAL SERVICES AUTHORITY,
MULUGU.

ORIGINAL

REGD. No.: 24170816

DISTRICT LEGAL SERVICES AUTHORITY: mulugu WRITTEN TEST
FOR THE POST OF Record Assistant
HALL TICKET-CUM-IDENTITY SHEET

DATE	TIME	NAME OF THE EXAMINATION CENTER
14/9/25	2:30pm-4pm	Govt. Junior College opp. Govt. Area Hospital mulugu
NAME AND FULL POSTAL ADDRESS OF THE CANDIDATE		
(to be filled by the Candidate)		
K. Srinivas Hno 9-4-618, Saptaharic colony Kasthinar. 505001		
K. Srinivas Signature of the Candidate		 <u>P. Anasuj</u> Primary Mdt: Kannepally

SURGEON
Jankapur
Mancheri.

SECRETARY
DISTRICT LEGAL SERVICES AUTHORITY,
mulugu

DUPLICATE

DISTRICT LEGAL SERVICES AUTHORITY: mulugu
WRITTEN TEST FOR THE POST OF Record Assistant
HALL TICKET-CUM-IDENTITY SHEET 24170816

DATE	TIME	NAME OF THE EXAMINATION CENTER
14/9/25	2:30pm-4pm	Govt. Junior College opp. Govt. Area Hospital mulugu
NAME AND FULL POSTAL ADDRESS OF THE CANDIDATE		
(to be filled by the Candidate)		
K. Srinivas Hno 9-4-618, Saptaharic colony Kasthinar. 505001		
K. Srinivas Signature of the Candidate		 <u>P. Anasuj</u> VETERINARY SURGEON Primary Veterinary Centre Jankapur Mdt: Kannepally, Dist: Mancheri.

SECRETARY
DISTRICT LEGAL SERVICES AUTHORITY,
mulugu

ORIGINAL

REGD. No.: 24170817

DISTRICT LEGAL SERVICES AUTHORITY : MULUGU
WRITTEN TEST FOR THE POST OF record assistant
HALL TICKET-CUM-IDENTITY SHEET

DATE	TIME	NAME OF THE EXAMINATION CENTER
14/9/25	2:30pm-4pm	Govt. Junior College opp. Govt. Area Hospital Mulugu
NAME AND FULL POSTAL ADDRESS OF THE CANDIDATE		
(to be filled by the Candidate)		
Banath. Akhil road, 1-142, mulugu. bandapally, 506343.		
Signature of the Candidate		

SECRETARY
DISTRICT LEGAL SERVICES AUTHORITY,
MULUGU

DUPLICATE

DISTRICT LEGAL SERVICES AUTHORITY : MULUGU
WRITTEN TEST FOR THE POST OF record assistant

HALL TICKET-CUM-IDENTITY SHEET 24170817

DATE	TIME	NAME OF THE EXAMINATION CENTER
14/9/25	2:30pm-4pm	(to be filled by the Candidate) Govt. Junior College opp. Govt. Area Hospital Mulugu
NAME AND FULL POSTAL ADDRESS OF THE CANDIDATE		
(to be filled by the Candidate)		
Banath akhil, 1-142, mulugu. bandapally, 506343.		
Signature of the Candidate		

SECRETARY
DISTRICT LEGAL SERVICES AUTHORITY,
MULUGU.

ORIGINAL

REGD. No.: 24170818

DISTRICT LEGAL SERVICES AUTHORITY : MULUGU
WRITTEN TEST FOR THE POST OF RECORD ASSISTANT
HALL TICKET-CUM-IDENTITY SHEET

DATE	TIME	NAME OF THE EXAMINATION CENTER
14/9/25	2:30pm-4pm	Govt. Junior College, opp: Govt. Area Hospital mulugu
NAME AND FULL POSTAL ADDRESS OF THE CANDIDATE		
(to be filled by the Candidate)		
YARA SHIVANI ROAD NO-4B 5-11-12921- , JAYARAM , HANUMAN NAGAR BHEKURU, 506001 HANAMKONDA 506001		
Y. Shivani Signature of the Candidate		 Master Govt. Markazi High School Hanumakonda.

SECRETARY
DISTRICT LEGAL SERVICES AUTHORITY,
MULUGU

DUPLICATE

DISTRICT LEGAL SERVICES AUTHORITY : MULUGU
WRITTEN TEST FOR THE POST OF RECORD ASSISTANT

HALL TICKET-CUM-IDENTITY SHEET 24170818

DATE	TIME	NAME OF THE EXAMINATION CENTER
14/9/25	2:30pm-4pm	(to be filled by the Candidate) Govt. Junior College opp: Govt. Area Hospital mulugu
NAME AND FULL POSTAL ADDRESS OF THE CANDIDATE		
(to be filled by the Candidate)		
YARA SHIVANI 5-11-12921- , HANUMAN NAGAR ROAD NO-4B , HANAMKONDA, 506001		
Y. Shivani Signature of the Candidate		 Master Govt. Markazi High School Hanumakonda.

SECRETARY
DISTRICT LEGAL SERVICES AUTHORITY,
MULUGU.

ORIGINAL

REGD. No.: 24170819

DISTRICT LEGAL SERVICES AUTHORITY : MULUGU
WRITTEN TEST FOR THE POST OF Revenue Assistant
HALL TICKET-CUM-IDENTITY SHEET

DATE	TIME	NAME OF THE EXAMINATION CENTER
~~14/9/25~~ 15-12-2024	~~2:30pm-4pm~~ 10-30	~~The District Court~~ Complex mulugu
NAME AND FULL POSTAL ADDRESS OF THE CANDIDATE (to be filled by the Candidate) GUTHIKONDA NIKHIL. Vill: PALAMPET. Md: VENKATAPUR Dist: MULUGU, TELANGANA. Pin: 506345.		
Signature of the Candidate G. Nikhil		



Govt. Junior College
opp: Govt. Area Hospital,
mulugu

Mandal Parishad Development Officer
Mandal Praja Parishad, Venkatapur.

SECRETARY
DISTRICT LEGAL SERVICES AUTHORITY,
MULUGU

DUPLICATE

DISTRICT LEGAL SERVICES AUTHORITY : MULUGU
WRITTEN TEST FOR THE POST OF Revenue Assistant

HALL TICKET-CUM-IDENTITY SHEET

DATE	TIME	NAME OF THE EXAMINATION CENTER
~~15-12-2024~~ 14/9/25	~~10-30~~ 2:30pm-4pm	~~The District Court~~ Complex mulugu.
NAME AND FULL POSTAL ADDRESS OF THE CANDIDATE (to be filled by the Candidate) GUTHIKONDA NIKHIL. Vill: PALAMPET. Md: VENKATAPUR Dist: MULUGU. TELANGANA. Pin: 506345.		
Signature of the Candidate G. Nikhil		



Govt. Junior College
opp: Govt. Area Hospital
mulugu

Mandal Parishad Development Officer
Mandal Praja Parishad, Venkatapur.

SECRETARY
DISTRICT LEGAL SERVICES AUTHORITY,
MULUGU.

ORIGINAL

REGD. No.:

24170820

DISTRICT LEGAL SERVICES AUTHORITY : MULUGU
WRITTEN TEST FOR THE POST OF Record Assistant
HALL TICKET-CUM-IDENTITY SHEET

DATE	TIME	NAME OF THE EXAMINATION CENTER
14/9/25	2:30pm-4pm	Gout. Junior College opp: Gout. Area Hospital Mulugu
NAME AND FULL POSTAL ADDRESS OF THE CANDIDATE		
(to be filled by the Candidate)		
KATLA. SADANANDAM./ S/O YELLAIAH Village] JOOKAL Mandal] CHETTYAL Dist] JEYASHENKAR BHUPALPALLY		
K. Sadanandam. Signature of the Candidate		

SECRETARY
DISTRICT LEGAL SERVICES AUTHORITY,
MULUGU

DUPLICATE

DISTRICT LEGAL SERVICES AUTHORITY : MULUGU
WRITTEN TEST FOR THE POST OF Record Assistant

HALL TICKET-CUM-IDENTITY SHEET

24170820

DATE	TIME	NAME OF THE EXAMINATION CENTER
14/9/25	2:30pm-4pm	Gout. Junior College opp: Gout. Area Hospital Mulugu
NAME AND FULL POSTAL ADDRESS OF THE CANDIDATE		
(to be filled by the Candidate)		
KATLA. SADANANDAM./ S/O YELLAIAH Village] JOOKAL Mandal] CHETTYAL Dist] JEYASHENKAR BHUPALPALLY		
K. Sadanandam. Signature of the Candidate		

SECRETARY
DISTRICT LEGAL SERVICES AUTHORITY,
MULUGU.

ORIGINAL

REGD. No.: 24170821

DISTRICT LEGAL SERVICES AUTHORITY, MULUGU
WRITTEN TEST FOR THE POST OF Record Assistant
HALL TICKET-CUM-IDENTITY SHEET

DATE	TIME	NAME OF THE EXAMINATION CENTER
14/9/25	2:30pm-4pm	Govt. Junior College, opp. Govt. Area Hospital Mulugu
NAME AND FULL POSTAL ADDRESS OF THE CANDIDATE		
(to be filled by the Candidate) AZMEERA SHARATH S. VEMANAYAK V. Gopalapuram, m. Chityal, D. Bishanpur.		
Signature of the Candidate A. Shalakt		 Govt Degree College, Duvvuru Dist. Siddipet, 502108 (T.S.) Candidate Number

SECRETARY
DISTRICT LEGAL SERVICES AUTHORITY,
MULUGU

DUPLICATE

DISTRICT LEGAL SERVICES AUTHORITY, (MULUGU) BHUPALPALLY.
WRITTEN TEST FOR THE POST OF Record Assistant

HALL TICKET-CUM-IDENTITY SHEET 24170821

DATE	TIME	NAME OF THE EXAMINATION CENTER
14/9/25	2:30pm-4pm	(to be filled by the Candidate) Govt. Junior College, opp. Govt. Area Hospital Mulugu
NAME AND FULL POSTAL ADDRESS OF THE CANDIDATE		
(to be filled by the Candidate) AZMEERA SHARATH S. VEMANAYAK V. Gopalapuram, m. Chityal, D. Bishanpur.		
Signature of the Candidate A. Shalakt		 PRINCIPAL Govt Degree College, Duvvuru Dist. Siddipet, 502108 (T.S.) Candidate Number

SECRETARY
DISTRICT LEGAL SERVICES AUTHORITY,
MULUGU

ORIGINAL

REGD. No.:

24170822

DISTRICT LEGAL SERVICES AUTHORITY : MULUGU
WRITTEN TEST FOR THE POST OF Record Assistant
HALL TICKET-CUM-IDENTITY SHEET

DATE	TIME	NAME OF THE EXAMINATION CENTER
14/9/25	2:30pm-4pm	Govt Junior College, opp. Govt. Area Hospital Mulugu
NAME AND FULL POSTAL ADDRESS OF THE CANDIDATE		
(to be filled by the Candidate)		
BANOTHU. ANUSHA. BANOTHU. DHANJYA. V. parsurajak thandei. m. Narsampet. D. Warangal.		
Signature of the Candidate		Anusha



mt Degree College, Dussan
Post Siddipet, 502108 (T.S)
Pin: 502108

SECRETARY

DISTRICT LEGAL SERVICES AUTHORITY,
MULUGU

DUPLICATE

DISTRICT LEGAL SERVICES AUTHORITY : MULUGU
WRITTEN TEST FOR THE POST OF Record Assistant

HALL TICKET-CUM-IDENTITY SHEET

24170822

DATE	TIME	NAME OF THE EXAMINATION CENTER
14/9/25	2:30pm-4pm	Govt. Junior College, opp. Govt. Area Hospital Mulugu
NAME AND FULL POSTAL ADDRESS OF THE CANDIDATE		
(to be filled by the Candidate)		
Banothu. Anusha. Banothu. Dhanjya. V. parsurajak thandei. m. Narsampet. D. Warangal.		
Signature of the Candidate		Anusha



mt Degree College, Dussan
Post Siddipet, 502108 (T.S)
Pin: 502108

SECRETARY

DISTRICT LEGAL SERVICES AUTHORITY,
MULUGU.

ORIGINAL

REGD. No.: 24170823

DISTRICT LEGAL SERVICES AUTHORITY :MULUGU WRITTEN TEST FOR THE POST OF Record Assistant HALL TICKET-CUM-IDENTITY SHEET

DATE	TIME	NAME OF THE EXAMINATION CENTER
~~15-12-2024~~ 14/9/25	~~10-30~~ 2:30pm-4pm	~~District Court Complex~~ mulugu
NAME AND FULL POSTAL ADDRESS OF THE CANDIDATE (to be filled by the Candidate) <u>Burra Ramu</u> Palampet village, Venkatapur Mandal, Mulugu Dist, 506345		
Signature of the Candidate <u>B. Ramu</u>		 Mandal Officer Venkatapur.

SECRETARY
DISTRICT LEGAL SERVICES AUTHORITY,
MULUGU

DUPLICATE

DISTRICT LEGAL SERVICES AUTHORITY : MULUGU WRITTEN TEST FOR THE POST OF Record Assistant HALL TICKET-CUM-IDENTITY SHEET

DATE	TIME	NAME OF THE EXAMINATION CENTER
~~15-12-2024~~ 14/9/25	~~10-30~~ 2:30pm-4pm	~~District Court Complex~~ mulugu
NAME AND FULL POSTAL ADDRESS OF THE CANDIDATE (to be filled by the Candidate) <u>Burra Ramu</u> palampet village, Venkatapur Mandal, Mulugu Dist, 506345		
Signature of the Candidate <u>B. Ramu</u>		 Mandal Officer Venkatapur.

SECRETARY
DISTRICT LEGAL SERVICES AUTHORITY,
MULUGU.

ORIGINAL

REGD. No.: 24170824

DISTRICT LEGAL SERVICES AUTHORITY : MULUGU WRITTEN TEST FOR THE POST OF RECORD ASSISTANT HALL TICKET-CUM-IDENTITY SHEET

DATE	TIME	NAME OF THE EXAMINATION CENTER
14/9/25	2:30pm-4pm	Govt. Junior College, opp: Govt. Area Hospital Mulugu
NAME AND FULL POSTAL ADDRESS OF THE CANDIDATE		
(to be filled by the Candidate)		
Reddy Raju, H.No: 7-94/1, Vill & M: Venkatapur, Di: Mulugu Pincode: 506352		
Signature of the Candidate		 Mr. Raju (Dis)

SECRETARY
DISTRICT LEGAL SERVICES AUTHORITY,
MULUGU

DUPLICATE

DISTRICT LEGAL SERVICES AUTHORITY : MULUGU WRITTEN TEST FOR THE POST OF RECORD ASSISTANT HALL TICKET-CUM-IDENTITY SHEET 24170824

DATE	TIME	NAME OF THE EXAMINATION CENTER
14/9/25	2:30pm-4pm	(to be filled by the Candidate) Govt. Junior College opp: Govt. Area Hospital Mulugu
NAME AND FULL POSTAL ADDRESS OF THE CANDIDATE		
(to be filled by the Candidate)		
Reddy Raju, H.No: 7-94/1, Vill & M: Venkatapur, Di: Mulugu Pincode: 506352		
Signature of the Candidate		 Mr. Raju (Dist)

SECRETARY
DISTRICT LEGAL SERVICES AUTHORITY,
MULUGU.

ORIGINAL

REGD. No.: 24170825

DISTRICT LEGAL SERVICES AUTHORITY : MULUGU
WRITTEN TEST FOR THE POST OF RECORD ASSISTANT
HALL TICKET-CUM-IDENTITY SHEET

DATE	TIME	NAME OF THE EXAMINATION CENTER
14/9/25	2:30pm-4pm	Govt. Junior College, opp: Govt. Area Hospital mulugu
NAME AND FULL POSTAL ADDRESS OF THE CANDIDATE		 M. N. Mahesh M. Sc (Ag) M. N. Mahesh Agriculture Officer Kannaigudem (Mand., Mulugu (Dist))
(to be filled by the Candidate) Pasunooti Naveen s/o Rajaiah, Vill & M: Venkatapur, Di: Mulugu, H.No: 7-51, Pincode : 506352.		
Signature of the Candidate		

SECRETARY

DISTRICT LEGAL SERVICES AUTHORITY,
MULUGU

DUPLICATE

DISTRICT LEGAL SERVICES AUTHORITY : MULUGU
WRITTEN TEST FOR THE POST OF RECORD ASSISTANT

HALL TICKET-CUM-IDENTITY SHEET 24170825

DATE	TIME	NAME OF THE EXAMINATION CENTER
14/9/25	2:30pm-4pm	(to be filled by the Candidate) Govt. Junior College, opp: Govt. Area Hospital mulugu
NAME AND FULL POSTAL ADDRESS OF THE CANDIDATE		 M. N. Mahesh M. Sc (Ag) M. N. Mahesh Agriculture Officer Kannaigudem (Mand., Mulugu (Dist))
(to be filled by the Candidate) Pasunooti Naveen s/o Rajaiah, Vill & M: Venkatapur, Di: Mulugu, H.No: 7-51, Pincode : 506352.		
Signature of the Candidate		

SECRETARY

DISTRICT LEGAL SERVICES AUTHORITY,
MULUGU.

ORIGINAL

REGD. No.: 24170826

DISTRICT LEGAL SERVICES AUTHORITY : MULUGU
WRITTEN TEST FOR THE POST OF RECORD ASSISTANT
HALL TICKET-CUM-IDENTITY SHEET

DATE	TIME	NAME OF THE EXAMINATION CENTER
14/9/25	2:30pm-4pm	Govt. Junior College opp. Govt. Area Hospital Mulugu
NAME AND FULL POSTAL ADDRESS OF THE CANDIDATE		
(to be filled by the Candidate)		
Kothapalli Harish S/o Anandam, H.No: 5-194, SV colony, Laxmidevipeta, Venkatapur, Mulugu - 506345		
K. Harish Signature of the Candidate		 K. Harish M.Sc (Ag) Mandal Agriculture Officer Kannagudem (M.D., Mulugu Dist)

SECRETARY

DISTRICT LEGAL SERVICES AUTHORITY,
MULUGU**DUPLICATE**DISTRICT LEGAL SERVICES AUTHORITY : MULUGU
WRITTEN TEST FOR THE POST OF RECORD ASSISTANT

HALL TICKET-CUM-IDENTITY SHEET

24170826

DATE	TIME	NAME OF THE EXAMINATION CENTER
(to be filled by the Candidate)		
NAME AND FULL POSTAL ADDRESS OF THE CANDIDATE		
(to be filled by the Candidate)		
Kothapalli Harish S/o Anandam, H.No: 5-194, SV colony, Laxmidevipeta, Venkatapur, Mulugu - 506345		
K. Harish Signature of the Candidate		 K. Harish M.Sc (Ag) Mandal Agriculture Officer Kannagudem (M.D., Mulugu Dist)

SECRETARY

DISTRICT LEGAL SERVICES AUTHORITY,
MULUGU.

ORIGINAL

REGD. No.: 24170827

DISTRICT LEGAL SERVICES AUTHORITY : MULUGU
WRITTEN TEST FOR THE POST OF Record Assistant
HALL TICKET-CUM-IDENTITY SHEET

DATE	TIME	NAME OF THE EXAMINATION CENTER
14/9/25	2:30pm-4pm	Gort. Junior College opp:- Gort Area Hospital mulugu
NAME AND FULL POSTAL ADDRESS OF THE CANDIDATE		
(to be filled by the Candidate)		
Lyada .vilasini D/o shankar H.No:- 5-167 , sc - colony (V) (M) :- mulugu (Di) mulugu , Pin:- 506343 ph:- 8688567640		
L. vilasini Signature of the Candidate		 Medical Officer THE HALL JELLY Dist. WARANGAL

SECRETARY
DISTRICT LEGAL SERVICES AUTHORITY,
MULUGU

DUPLICATE

DISTRICT LEGAL SERVICES AUTHORITY : MULUGU
WRITTEN TEST FOR THE POST OF Record Assistant

HALL TICKET-CUM-IDENTITY SHEET 24170827

DATE	TIME	NAME OF THE EXAMINATION CENTER
14/9/25	2:30pm-4pm	(to be filled by the Candidate) Gort. Junior College, opp:- Gort Area Hospital mulugu
NAME AND FULL POSTAL ADDRESS OF THE CANDIDATE		
(to be filled by the Candidate)		
Lyada .vilasini D/o shankar H.No:- 5-167 , sc - colony (V) (M) :- mulugu (Di) mulugu , Pin:- 506343 ph:- 8688567640		
L. vilasini Signature of the Candidate		 Medical Officer THE HALL JELLY Dist. WARANGAL

SECRETARY
DISTRICT LEGAL SERVICES AUTHORITY,
MULUGU.

ORIGINAL

REGD. No.: 24170828

DISTRICT LEGAL SERVICES AUTHORITY, MULUGU
WRITTEN TEST FOR THE POST OF Record Assistant
HALL TICKET-CUM-IDENTITY SHEET

DATE	TIME	NAME OF THE EXAMINATION CENTER
14/9/25	2:30pm-4pm	Govt. Junior College opp: Govt. Area Hospital Mulugu
NAME AND FULL POSTAL ADDRESS OF THE CANDIDATE (to be filled by the Candidate)		
H: No: 12-31 (VII) :- Rangarapally Vnd: Mulugu Dist: Mulugu Pincode: 506343.		
Signature of the Candidate Radhika		 Medical Officer PHC NALLABELLY Dist: Warangal

SECRETARY
DISTRICT LEGAL SERVICES AUTHORITY,
MULUGU

DUPLICATE

DISTRICT LEGAL SERVICES AUTHORITY, MULUGU
WRITTEN TEST FOR THE POST OF Record Assistant

HALL TICKET-CUM-IDENTITY SHEET 24170828

DATE	TIME	NAME OF THE EXAMINATION CENTER
14/9/25	2:30pm-4pm	(to be filled by the Candidate) Govt. Junior College opp: Govt. Area Hospital Mulugu
NAME AND FULL POSTAL ADDRESS OF THE CANDIDATE (to be filled by the Candidate)		
H: No: 12-31, (VII) :- Rangarapally Vnd: Mulugu Dist: Mulugu Pincode: 506343.		
Signature of the Candidate Radhika		 Medical Officer PHC NALLABELLY Dist: Warangal

SECRETARY
DISTRICT LEGAL SERVICES AUTHORITY,
MULUGU

ORIGINAL

REGD. No.: 24170829

DISTRICT LEGAL SERVICES AUTHORITY : MULUGU
WRITTEN TEST FOR THE POST OF Record Assistant
HALL TICKET-CUM-IDENTITY SHEET

DATE	TIME	NAME OF THE EXAMINATION CENTER
14/9/25	2:30pm-4pm	Gout. Junior College opp: Gout. Area Hospital mulugu
NAME AND FULL POSTAL ADDRESS OF THE CANDIDATE		
(to be filled by the Candidate)		
Pasaragonda Poornachander S/o Sambaiiah H.No-6-100, SC-Colony VVXMS mulugu Dist mulugu, Pin:- 506343 mobile-9705048523		
P. Poornachander Signature of the Candidate		 For LLY JAL

SECRETARY
DISTRICT LEGAL SERVICES AUTHORITY,
MULUGU

DUPLICATE

DISTRICT LEGAL SERVICES AUTHORITY : MULUGU
WRITTEN TEST FOR THE POST OF Record Assistant

HALL TICKET-CUM-IDENTITY SHEET 24170829

DATE	TIME	NAME OF THE EXAMINATION CENTER
14/9/25	2:30pm-4pm	(to be filled by the Candidate) Gout. Junior College opp: Gout. Area Hospital mulugu
NAME AND FULL POSTAL ADDRESS OF THE CANDIDATE		
(to be filled by the Candidate)		
Pasaragonda Poornachander S/o Sambaiiah H.No-6-100, SC-Colony VVXMS mulugu Dist mulugu Pin:- 506343 mobile-9705048523		
P. Poornachander Signature of the Candidate		 For LLY JAL

SECRETARY
DISTRICT LEGAL SERVICES AUTHORITY,
MULUGU.

ORIGINAL

REGD. No.: 24170830

DISTRICT LEGAL SERVICES AUTHORITY :MULUGU
WRITTEN TEST FOR THE POST OF Record Assistant
HALL TICKET-CUM-IDENTITY SHEET

DATE	TIME	NAME OF THE EXAMINATION CENTER
14/9/25	2:30pm-4pm	Govt. Junior College, opp:- Govt. Area Hospital Mulugu
NAME AND FULL POSTAL ADDRESS OF THE CANDIDATE		
(to be filled by the Candidate)		
Mahammad. Riyaz, H.No. 8-41/3, LB Nagar, Bluepally, Jayashankar Bluepally Pincode! 506169		
Signature of the Candidate		

SECRETARY
DISTRICT LEGAL SERVICES AUTHORITY,
MULUGU

DUPLICATE

DISTRICT LEGAL SERVICES AUTHORITY : MULUGU
WRITTEN TEST FOR THE POST OF Record Assistant

HALL TICKET-CUM-IDENTITY SHEET 24170830

DATE	TIME	NAME OF THE EXAMINATION CENTER
14/9/25	2:30pm-4pm	(to be filled by the Candidate) Govt. Junior College opp:- Govt. Area Hospital Mulugu
NAME AND FULL POSTAL ADDRESS OF THE CANDIDATE		
(to be filled by the Candidate)		
Mahammad. Riyaz, H.No. 8-41/3, LB Nagar, Bluepally, Jayashankar Bluepally pincode! 506169		
Signature of the Candidate		

SECRETARY
DISTRICT LEGAL SERVICES AUTHORITY,
MULUGU.

ORIGINAL

REGD. No.: 24170831

DISTRICT LEGAL SERVICES AUTHORITY : MULUGU
WRITTEN TEST FOR THE POST OF Record Assistant
HALL TICKET-CUM-IDENTITY SHEET

DATE	TIME	NAME OF THE EXAMINATION CENTER
~~15/12/2024~~ 14/9/25	~~10:30~~ 2:30pm-4pm	~~District Court Complex~~ Mulugu
NAME AND FULL POSTAL ADDRESS OF THE CANDIDATE		
(to be filled by the Candidate)		
BANDAVATH RADHIKA D.V. NANU		
H.NO: 4-67, (post villing mandal) GOVINDARAO PET		
DIST: MULUGU PIN 506344.		
B Radhika Signature of the Candidate		B Radhika



SECRETARY
DISTRICT LEGAL SERVICES AUTHORITY,
MULUGU

DUPLICATE

DISTRICT LEGAL SERVICES AUTHORITY : MULUGU
WRITTEN TEST FOR THE POST OF Record Assistant

HALL TICKET-CUM-IDENTITY SHEET

DATE	TIME	NAME OF THE EXAMINATION CENTER
~~15/12/2024~~ 14/9/25	~~10:30~~ 2:30pm-4pm	~~District Court Complex~~ Mulugu
NAME AND FULL POSTAL ADDRESS OF THE CANDIDATE		
(to be filled by the Candidate)		
BANDAVATH RADHIKA D.V. NANU		
H.NO: 4-67, post villing mandal:- GOVINDARAO PET		
DIST: MULUGU PIN 506344.		
B Radhika Signature of the Candidate		B Radhika



SECRETARY
DISTRICT LEGAL SERVICES AUTHORITY,
MULUGU.

ORIGINAL

REGD. No.: 24170832

DISTRICT LEGAL SERVICES AUTHORITY : MULUGU WRITTEN TEST FOR THE POST OF Record - Assistant HALL TICKET-CUM-IDENTITY SHEET

DATE	TIME	NAME OF THE EXAMINATION CENTER
14/9/25	2:30pm-4pm	Govt. Junior College opp. Govt. Area Hospital Mulugu
NAME AND FULL POSTAL ADDRESS OF THE CANDIDATE		
(to be filled by the Candidate)		
Vullerao:- Akhila D/o. V. Arjun		
H.No:- 5-32, Mulugu, (Di) Mulugu		
Pin :- 506343.		
V. Akhila.		 Medical Officer C. N. S. ELLY W. R. GAL
Signature of the Candidate		

SECRETARY
DISTRICT LEGAL SERVICES AUTHORITY,
MULUGU

DUPLICATE

DISTRICT LEGAL SERVICES AUTHORITY : MULUGU WRITTEN TEST FOR THE POST OF Record - Assistant

HALL TICKET-CUM-IDENTITY SHEET 24170832

DATE	TIME	NAME OF THE EXAMINATION CENTER
14/9/25	2:30pm-4pm	Govt. Junior College opp. Govt. Area Hospital Mulugu
NAME AND FULL POSTAL ADDRESS OF THE CANDIDATE		
(to be filled by the Candidate)		
Vullerao:- Akhila D/o. V. Arjun		
H.No:- 5-32, Mulugu, (Di) Mulugu		
Pin :- 506343.		
V. Akhila		 Medical Officer C. N. S. ELLY W. R. GAL
Signature of the Candidate		

SECRETARY
DISTRICT LEGAL SERVICES AUTHORITY,
MULUGU.

ORIGINAL

REGD. No.: 24170833

DISTRICT LEGAL SERVICES AUTHORITY, MULUGU
WRITTEN TEST FOR THE POST OF Record Assistant
HALL TICKET-CUM-IDENTITY SHEET

DATE	TIME	NAME OF THE EXAMINATION CENTER
14/9/25	2:30pm-4pm	Govt Junior College, opp: Govt Area Hospital Mulugu
NAME AND FULL POSTAL ADDRESS OF THE CANDIDATE (to be filled by the Candidate)		
H.NO: 2-99, MULUGU, PATHIPALLY TELANGANA: 506352		
Signature of the Candidate		 Gazetted Head Master Group DE (Classified) IIA Mdt: & Dist: Mulugu-506352

A. Q. U.

SECRETARY

DISTRICT LEGAL SERVICES AUTHORITY,
MULUGU

DUPLICATE

DISTRICT LEGAL SERVICES AUTHORITY : MULUGU
WRITTEN TEST FOR THE POST OF Record Assistant

HALL TICKET-CUM-IDENTITY SHEET 24170833

DATE	TIME	NAME OF THE EXAMINATION CENTER
14/9/25	2:30pm-4pm	Govt Junior College opp: Govt Area Hospital Mulugu
NAME AND FULL POSTAL ADDRESS OF THE CANDIDATE (to be filled by the Candidate)		
2-99; MULUGU, PATHIPALLY TELANGANA : 506352		
Signature of the Candidate		 Gazetted Head Master Group DE (Classified) IIA Mdt: & Dist: Mulugu-506352

A. Q. U.

SECRETARY

DISTRICT LEGAL SERVICES AUTHORITY,
MULUGU.

ORIGINAL

REGD. No.: 24170834

DISTRICT LEGAL SERVICES AUTHORITY : MULUGU
WRITTEN TEST FOR THE POST OF RECORD ASSISTANT
HALL TICKET-CUM-IDENTITY SHEET

DATE	TIME	NAME OF THE EXAMINATION CENTER
14/9/25	2:30pm-4pm	Govt. Junior College opp: Govt. Area Hospital Mulugu
NAME AND FULL POSTAL ADDRESS OF THE CANDIDATE		
(to be filled by the Candidate)		
PERABOSNA BHANU PRASAD H.NO. 3-77, SBI ROAD, MULUGU MULUGU, PIN CODE: 506342		
Signature of the Candidate		PERABOSNA BHANU PRASAD 



ment Pleader
udge Court
Cell-889710160

SECRETARY
DISTRICT LEGAL SERVICES AUTHORITY,
MULUGU

DUPLICATE

DISTRICT LEGAL SERVICES AUTHORITY : MULUGU
WRITTEN TEST FOR THE POST OF RECORD ASSISTANT

HALL TICKET-CUM-IDENTITY SHEET

24170834

DATE	TIME	NAME OF THE EXAMINATION CENTER
14/9/25	2:30pm-4pm	Govt. Junior College opp: Govt. Area Hospital Mulugu
NAME AND FULL POSTAL ADDRESS OF THE CANDIDATE		
(to be filled by the Candidate)		
PERABOSNA BHANU PRASAD H.NO. 3-77, SBI ROAD, MULUGU MULUGU, PIN CODE: 506342		
Signature of the Candidate		PERABOSNA BHANU PRASAD 



ment Pleader
udge Court
Mulugu. Cell-889710160

SECRETARY
DISTRICT LEGAL SERVICES AUTHORITY,
MULUGU.

ORIGINAL

REGD. No.: 24170835

DISTRICT LEGAL SERVICES AUTHORITY: MULUGU
WRITTEN TEST FOR THE POST OF Record Assistant
HALL TICKET-CUM-IDENTITY SHEET

DATE	TIME	NAME OF THE EXAMINATION CENTER
14/9/25	2:30pm-4pm	Gout. Junior College opp. Gout. Area Hospital Mulugu
NAME AND FULL POSTAL ADDRESS OF THE CANDIDATE		
(to be filled by the Candidate)		
Barnath. Nuthan Nayak, 910 Barnath Devsingh, H.No: 1-591A, Madanapally, Mulugu Telangana, 506343		
Signature of the Candidate		 Pleade. Junior civil Judge Court Mulugu. Cell: 890771000

SECRETARY
DISTRICT LEGAL SERVICES AUTHORITY,
MULUGU

DUPLICATE

DISTRICT LEGAL SERVICES AUTHORITY: MULUGU
WRITTEN TEST FOR THE POST OF Record Assistant

HALL TICKET-CUM-IDENTITY SHEET 24170835

DATE	TIME	NAME OF THE EXAMINATION CENTER
14/9/25	2:30pm-4pm	Gout. Junior College opp. Gout. Area Hospital Mulugu
NAME AND FULL POSTAL ADDRESS OF THE CANDIDATE		
(to be filled by the Candidate)		
Barnath. Nuthan Nayak, S/o B. Devsingh H.No: 1-591A, Madanapally, Mulugu. Telangana. 506343		
Signature of the Candidate		 Pleade. Junior civil Judge Court Mulugu. Cell: 890771000

SECRETARY
DISTRICT LEGAL SERVICES AUTHORITY,
MULUGU.

ORIGINAL

REGD. No.: 24170836

DISTRICT LEGAL SERVICES AUTHORITY : MULUGU WRITTEN TEST FOR THE POST OF RECORD ASSISTANT HALL TICKET-CUM-IDENTITY SHEET

DATE	TIME	NAME OF THE EXAMINATION CENTER
14/9/25	2:30pm-4pm	Govt Junior College opp: Govt Area Hospital mulugu
NAME AND FULL POSTAL ADDRESS OF THE CANDIDATE		
(to be filled by the Candidate)		
PORIKA · SUNIL KUMAR S/. RAJU NAIK H NO 1-82, ST COLONY, BANDARUPALLY (M/D) MULUGU PIN: 506343		
Signature of the Candidate		 Sunilkumar 25/11/2024 Junior Clerk Mulugu Cell- 8807711160

SECRETARY
DISTRICT LEGAL SERVICES AUTHORITY,
MULUGU

DUPLICATE

DISTRICT LEGAL SERVICES AUTHORITY : MULUGU WRITTEN TEST FOR THE POST OF Record Assistant

HALL TICKET-CUM-IDENTITY SHEET 24170836

DATE	TIME	NAME OF THE EXAMINATION CENTER
14/9/25	2:30pm-4pm	(to be filled by the Candidate) Govt Junior College, opp: Govt Area Hospital mulugu
NAME AND FULL POSTAL ADDRESS OF THE CANDIDATE		
(to be filled by the Candidate)		
PORIKA · SUNIL KUMAR S/. RAJU NAIK H NO 1-82, ST COLONY, BANDARUPALLY (M/D) MULUGU PIN: 506343		
Signature of the Candidate		 Sunilkumar 25/11/2024 Junior Clerk Mulugu Cell- 8807711160

SECRETARY
DISTRICT LEGAL SERVICES AUTHORITY,
MULUGU

ORIGINAL

REGD. No.: 24170837

DISTRICT LEGAL SERVICES AUTHORITY : MULUGU
WRITTEN TEST FOR THE POST OF Record Assistant
HALL TICKET-CUM-IDENTITY SHEET

DATE	TIME	NAME OF THE EXAMINATION CENTER
14/9/25	2:30pm-4pm	Govt. Jr. College opp: Govt. Area Hospital Mulugu
NAME AND FULL POSTAL ADDRESS OF THE CANDIDATE		
(to be filled by the Candidate)		
Baanothu. Sunitha. D/o Veeraiah # No. 12-43 Rangarao pally. Mulugu Mulugu 506345		
Signature of the Candidate		B. Sunitha



Medical Officer
PHC NALLABELLI
Dist. Warangal

SECRETARY

DISTRICT LEGAL SERVICES AUTHORITY,
MULUGU

DUPLICATE

DISTRICT LEGAL SERVICES AUTHORITY : MULUGU
WRITTEN TEST FOR THE POST OF Record Assistant

HALL TICKET-CUM-IDENTITY SHEET 24170837

DATE	TIME	NAME OF THE EXAMINATION CENTER
14/9/25	2:30pm-4pm	Govt. Junior College opp: Govt. Area Hospital Mulugu
NAME AND FULL POSTAL ADDRESS OF THE CANDIDATE		
(to be filled by the Candidate)		
Baanothu. Sunitha. D/o Veeraiah 12-43 Rangarao pally. Mulugu Mulugu 506345		
Signature of the Candidate		B. Sunitha



Medical Officer
PHC NALLABELLI
Dist. Warangal

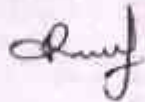
SECRETARY

DISTRICT LEGAL SERVICES AUTHORITY,
MULUGU

ORIGINAL

REGD. No.: 24170838

DISTRICT LEGAL SERVICES AUTHORITY : MULUGU
WRITTEN TEST FOR THE POST OF Record Assistant
HALL TICKET-CUM-IDENTITY SHEET

DATE	TIME	NAME OF THE EXAMINATION CENTER
14/11/25	2:30PM-4PM	Govt. Junior College, Opp:- Govt. Area Hospital, Mulugu.
NAME AND FULL POSTAL ADDRESS OF THE CANDIDATE		
(to be filled by the Candidate)		
PORIKA RAJKUMAR S/O JEEVA NAIK RANGA RAO PALLY MULUGU 12-28 MULUGU, TELANGANA 506343		
Signature of the Candidate		
		 MEDICAL OFFICER TPHC - RAYANGUDEGI Dist: Mulugu

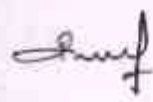
SECRETARY
DISTRICT LEGAL SERVICES AUTHORITY,
MULUGU

DUPLICATE

DISTRICT LEGAL SERVICES AUTHORITY : MULUGU
WRITTEN TEST FOR THE POST OF Record Assistant

HALL TICKET-CUM-IDENTITY SHEET

24170838

DATE	TIME	NAME OF THE EXAMINATION CENTER
14/11/25	2:30PM-4PM	Govt. Junior College, Opp:- Govt. Area Hospital, Mulugu.
NAME AND FULL POSTAL ADDRESS OF THE CANDIDATE		
(to be filled by the Candidate)		
PORIKA RAJKUMAR S/O JEEVA NAIK 12-28 RANGA RAO PALLY MULUGU MULUGU, TELANGANA 506343		
Signature of the Candidate		
		 MEDICAL OFFICER TPHC - RAYANGUDEGI Dist: Mulugu

SECRETARY
DISTRICT LEGAL SERVICES AUTHORITY,
MULUGU.

ORIGINAL

REGD. No.: 24170839

DISTRICT LEGAL SERVICES AUTHORITY :MULUGU
WRITTEN TEST FOR THE POST OF Record Assistant
HALL TICKET-CUM-IDENTITY SHEET

DATE	TIME	NAME OF THE EXAMINATION CENTER
14/9/25	2:30PM-4PM	Govt. Junior College, opp1- Govt. Area Hospital Mulugu.
NAME AND FULL POSTAL ADDRESS OF THE CANDIDATE <u>M. Vinay Kumar</u> (to be filled by the Candidate)		 R. CHANDRAIAH Government Pleader Junior civil Judge Court Mulugu. Cell- 8897710166
Ambedkar colony, Bandarupally, Mulugu. Pincode : 506343		
M. Vinay Kumar Signature of the Candidate		

SECRETARY
DISTRICT LEGAL SERVICES AUTHORITY,
MULUGU

DUPLICATE

DISTRICT LEGAL SERVICES AUTHORITY : MULUGU
WRITTEN TEST FOR THE POST OF Record Assistant

HALL TICKET-CUM-IDENTITY SHEET 24170839

DATE	TIME	NAME OF THE EXAMINATION CENTER
14/9/25	2:30PM-4PM	(to be filled by the Candidate) Govt. Junior College, opp1- Govt. Area Hospital, Mulugu.
NAME AND FULL POSTAL ADDRESS OF THE CANDIDATE <u>M. Vinay Kumar</u> (to be filled by the Candidate)		 R. CHANDRAIAH Government Pleader Junior civil Judge Court Mulugu. Cell- 8897710166
Ambedkar colony, Bandarupally, Mulugu. Pincode : 506343		
M. Vinay Kumar Signature of the Candidate		

ORIGINAL

REGD. No.: 24170840

DISTRICT LEGAL SERVICES AUTHORITY : MULUGU
WRITTEN TEST FOR THE POST OF Record Assistant
HALL TICKET-CUM-IDENTITY SHEET

DATE	TIME	NAME OF THE EXAMINATION CENTER
14/9/25	2:30PM-4PM	Govt. Junior College, Opp- Govt. Area Hospital, Mulugu.
NAME AND FULL POSTAL ADDRESS OF THE CANDIDATE (to be filled by the Candidate)		
Jakkula Madhu		
Vill: MULUGU		PIN: 506343
MDL: MULUGU		Gollawada.
Dist: MULUGU		
J. Madhu Signature of the Candidate		 Mandal Parishad Development Officer Pragathi Prashad, Mulugu

SECRETARY
DISTRICT LEGAL SERVICES AUTHORITY,
MULUGU

DUPLICATE

DISTRICT LEGAL SERVICES AUTHORITY : MULUGU
WRITTEN TEST FOR THE POST OF Record Assistant

HALL TICKET-CUM-IDENTITY SHEET 24170840

DATE	TIME	NAME OF THE EXAMINATION CENTER
14/9/25	2:30PM-4PM	(to be filled by the Candidate) Govt. Junior College, Opp- Govt. Area Hospital, Mulugu.
NAME AND FULL POSTAL ADDRESS OF THE CANDIDATE (to be filled by the Candidate)		
Jakkula Madhu		
Vill: MULUGU		PIN: 506343
MDL: MULUGU		Gollawada.
Dist: MULUGU		
J. Madhu Signature of the Candidate		 Mandal Parishad Development Officer Pragathi Prashad, Mulugu

SECRETARY
DISTRICT LEGAL SERVICES AUTHORITY,
MULUGU.

ORIGINAL

REGD. No.: 24170841

DISTRICT LEGAL SERVICES AUTHORITY : MULUGU
WRITTEN TEST FOR THE POST OF Record Assistant
HALL TICKET-CUM-IDENTITY SHEET

DATE	TIME	NAME OF THE EXAMINATION CENTER
14/9/25	2:30pm-4pm	Govt. Junior College, Opp- Govt. Area Hospital, Mulugu.
NAME AND FULL POSTAL ADDRESS OF THE CANDIDATE		
(to be filled by the Candidate)		
KAALVA SHOBHA RANI D/O KAALVA CHENCHU H.No: 8-225, AKINEPALLI MALLARAM MANGAPETA, PIN: 506172, MULUGU(DT)		
Signature of the Candidate		 K. Shobharani CIVIL ASSISTANT SURGEON DISTRICT HOSPITAL MULUGU

SECRETARY
DISTRICT LEGAL SERVICES AUTHORITY,
MULUGU

DUPLICATE

DISTRICT LEGAL SERVICES AUTHORITY : MULUGU
WRITTEN TEST FOR THE POST OF Record Assistant

HALL TICKET-CUM-IDENTITY SHEET 24170841

DATE	TIME	NAME OF THE EXAMINATION CENTER
~~15/12/2024~~ 14/9/25	~~10:30 A.M~~ 2:30pm-4pm	(to be filled by the Candidate) District Court Complex, Mulugu. Govt. Junior College, Opp- Govt. Area Hospital, Mulugu.
NAME AND FULL POSTAL ADDRESS OF THE CANDIDATE		
(to be filled by the Candidate)		
KAALVA SHOBHA RANI D/O KAALVA CHENCHU H.No: 8-225, AKINEPALLI MALLARAM MANGAPETA, PIN: 506172, MULUGU(DT)		
Signature of the Candidate		 K. Shobharani CIVIL ASSISTANT SURGEON DISTRICT HOSPITAL MULUGU

SECRETARY
DISTRICT LEGAL SERVICES AUTHORITY,
MULUGU.

ORIGINAL

REGD. No.:

24170842

DISTRICT LEGAL SERVICES AUTHORITY : MULUGU
 WRITTEN TEST FOR THE POST OF Record assistant
 HALL TICKET-CUM-IDENTITY SHEET

DATE	TIME	NAME OF THE EXAMINATION CENTER
14/9/25	2:30PM-4PM	Govt. Junior College, opp- Govt. Area Hospital, Mulugu.
NAME AND FULL POSTAL ADDRESS OF THE CANDIDATE		
(to be filled by the Candidate)		
c/o: Kommireni. Iarmi narayana, 1-259/1 bhavani nagar, mulugu, 506343.		
Signature of the Candidate		



SECRETARY

DISTRICT LEGAL SERVICES AUTHORITY,
 MULUGU

DUPLICATE

DISTRICT LEGAL SERVICES AUTHORITY : MULUGU
 WRITTEN TEST FOR THE POST OF Record assistant

HALL TICKET-CUM-IDENTITY SHEET

24170842

DATE	TIME	NAME OF THE EXAMINATION CENTER
14/9/25	2:30PM-4PM	Govt. Junior College, opp- Govt. Area Hospital, Mulugu.
NAME AND FULL POSTAL ADDRESS OF THE CANDIDATE		
(to be filled by the Candidate)		
c/o:- Kommireni. Iarmi narayana, 1-259/1 bhavani nagar, mulugu, 506343.		
Signature of the Candidate		



SECRETARY

DISTRICT LEGAL SERVICES AUTHORITY,
 MULUGU.

ORIGINAL

REGD. No.: 24170843

DISTRICT LEGAL SERVICES AUTHORITY : MULUGU
WRITTEN TEST FOR THE POST OF Record Assistant
HALL TICKET-CUM-IDENTITY SHEET

DATE	TIME	NAME OF THE EXAMINATION CENTER
14/9/25	2:30PM-4PM	Govt. Junior College, opp- Govt. Area Hospital, Mulugu.
NAME AND FULL POSTAL ADDRESS OF THE CANDIDATE		
(to be filled by the Candidate) Emmadi Shiva, H.No:- 6-111, Babu Jagaji- eevan Ram Street, (vill) 2 (md) Jyotsna (dist) Mulugu, 506344.		
Signature of the Candidate		<u>Shiva</u>



CIVIL ASSISTANT
DISTRICT HOSPITAL MULUGU

SECRETARY
DISTRICT LEGAL SERVICES AUTHORITY,
MULUGU

DUPLICATE

DISTRICT LEGAL SERVICES AUTHORITY : MULUGU
WRITTEN TEST FOR THE POST OF Record Assistant

HALL TICKET-CUM-IDENTITY SHEET 24170843

DATE	TIME	NAME OF THE EXAMINATION CENTER
14/9/25	2:30PM-4PM	(to be filled by the Candidate) Govt. Junior College, opp- Govt. Area Hospital, Mulugu.
NAME AND FULL POSTAL ADDRESS OF THE CANDIDATE		
(to be filled by the Candidate) Emmadi Shiva, H.No:- 6-111, Babu Jagaji- eevan Ram Street, (vill) 2 (md) Jyotsna -raopet, (dist) Mulugu, 506344.		
Signature of the Candidate		<u>Shiva</u>



CIVIL ASSISTANT
DISTRICT HOSPITAL MULUGU

SECRETARY
DISTRICT LEGAL SERVICES AUTHORITY,
MULUGU.

ORIGINAL

REGD. No.: 24170844

DISTRICT LEGAL SERVICES AUTHORITY : MULUGU
WRITTEN TEST FOR THE POST OF Record Assistant
HALL TICKET-CUM-IDENTITY SHEET

DATE	TIME	NAME OF THE EXAMINATION CENTER
14/9/25	2:30pm-4pm	Govt. Junior College, opp:- Govt. Area Hospital, Mulugu.
NAME AND FULL POSTAL ADDRESS OF THE CANDIDATE		
(to be filled by the Candidate)		
KOTHA PELLY SRI CHANDANA H.No:-6-231/3, Brundawana colony, Mulugu vill, and mandal Mulugu district-506343		
K. Sri Chandana Signature of the Candidate		



Medical Officer
PHOTO LABELLY
Dist: WARANGAL

SECRETARY
DISTRICT LEGAL SERVICES AUTHORITY,
MULUGU

DUPLICATE

DISTRICT LEGAL SERVICES AUTHORITY : MULUGU
WRITTEN TEST FOR THE POST OF Record Assistant

HALL TICKET-CUM-IDENTITY SHEET

24170844

DATE	TIME	NAME OF THE EXAMINATION CENTER
14/9/25	2:30pm-4pm	Govt. Junior College, opp:- Govt. Area Hospital, Mulugu.
NAME AND FULL POSTAL ADDRESS OF THE CANDIDATE		
(to be filled by the Candidate)		
KOTHA PELLY SRI CHANDANA H.No:-6-231/3, Brundawana colony, Mulugu vill, and mandal Mulugu district-506343		
K. Sri Chandana Signature of the Candidate		



Medical Officer
PHOTO LABELLY
Dist: WARANGAL

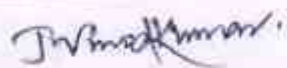
SECRETARY
DISTRICT LEGAL SERVICES AUTHORITY,
MULUGU

ORIGINAL

REGD. No.:

24170845

DISTRICT LEGAL SERVICES AUTHORITY :MULUGU WRITTEN TEST FOR THE POST OF Record Assistant HALL TICKET-CUM-IDENTITY SHEET

DATE	TIME	NAME OF THE EXAMINATION CENTER
14/9/25	2:30PM-4PM	Govt. Junior College, Opp- Govt. Area Hospital Mulugu.
NAME AND FULL POSTAL ADDRESS OF THE CANDIDATE		
(to be filled by the Candidate)		
Hno: 5-145, JATOTH VINODKUNAR S/O REXHUNASA Hno: 5-145, Vill: LAMMIDENIPET MDI: VENKATAPUR dist: mulugu 506345		
Signature of the Candidate		
		

SECRETARY

DISTRICT LEGAL SERVICES AUTHORITY,
MULUGU

DUPLICATE

DISTRICT LEGAL SERVICES AUTHORITY :MULUGU WRITTEN TEST FOR THE POST OF RECORD Assistant

HALL TICKET-CUM-IDENTITY SHEET

24170845

DATE	TIME	NAME OF THE EXAMINATION CENTER
14/9/25	2:30PM-4PM	Govt. Junior College, Opp- Govt. Area Hospital Mulugu.
NAME AND FULL POSTAL ADDRESS OF THE CANDIDATE		
(to be filled by the Candidate)		
JATOTH VINODKUNAR S/O REXHUNASA Hno: 5-145, Vill: LAMMIDENIPET MDI: VENKATAPUR dist: mulugu 506345		
Signature of the Candidate		
		

SECRETARY

DISTRICT LEGAL SERVICES AUTHORITY,
MULUGU.

ORIGINAL

REGD. No.: 24170846

DISTRICT LEGAL SERVICES AUTHORITY: MULUGU
WRITTEN TEST FOR THE POST OF Steno/Typist/Record Assistant
HALL TICKET-CUM-IDENTITY SHEET

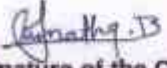
DATE	TIME	NAME OF THE EXAMINATION CENTER
14/9/25	2:30pm-4pm	Dist. Govt. Junior College opp. Govt. Area Hospital Mulugu
NAME AND FULL POSTAL ADDRESS OF THE CANDIDATE		
(to be filled by the Candidate)		
BANOTHU SAMATHA Ramchandrapuram, 1-108, 506349 Mulugu(M), Mulugu(D), Telangana		
 Signature of the Candidate		 Medical Officer PHC NALLABE LLY Dist: WARANGAL

SECRETARY
DISTRICT LEGAL SERVICES AUTHORITY,
MULUGU

DUPLICATE

DISTRICT LEGAL SERVICES AUTHORITY: MULUGU
WRITTEN TEST FOR THE POST OF Steno/Typist/Record Assistant

HALL TICKET-CUM-IDENTITY SHEET 24170846

DATE	TIME	NAME OF THE EXAMINATION CENTER
14/9/25	2:30pm-4pm	(to be filled by the Candidate) Govt. Junior College opp. Govt. Area Hospital Mulugu
NAME AND FULL POSTAL ADDRESS OF THE CANDIDATE		
(to be filled by the Candidate)		
BANOTHU SAMATHA Ramchandrapuram, 1-108, 506349 Mulugu(M), Mulugu(Dist), Telangana		
 Signature of the Candidate		 Medical Officer PHC NALLABE LLY Dist: WARANGAL

SECRETARY
DISTRICT LEGAL SERVICES AUTHORITY,
MULUGU.

ORIGINAL

REGD. No.: 24170847

DISTRICT LEGAL SERVICES AUTHORITY - MULUGU
WRITTEN TEST FOR THE POST OF RECORD ASSISTANT
HALL TICKET-CUM-IDENTITY SHEET

DATE	TIME	NAME OF THE EXAMINATION CENTER
14/9/25	2:30pm-4pm	Govt. Junior College opp. Govt. Area Hospital Mulugu
NAME AND FULL POSTAL ADDRESS OF THE CANDIDATE		
(to be filled by the Candidate)		
KASARAPU RANJITH KUMAR H.No. 1-72, Near Ramalagan, Mulugu Village and Mandal, Mulugu District, Pin: 506303 Telangana State.		
K. Ranjith Kumar Signature of the Candidate		 Gazetted Officer ZPHS DEPT Mul. & Dist. Mulugu 24170847

SECRETARY
DISTRICT LEGAL SERVICES AUTHORITY,
MULUGU

DUPLICATE

DISTRICT LEGAL SERVICES AUTHORITY - MULUGU
WRITTEN TEST FOR THE POST OF RECORD ASSISTANT

HALL TICKET-CUM-IDENTITY SHEET 24170847

DATE	TIME	NAME OF THE EXAMINATION CENTER
14/9/25	2:30pm-4pm	(to be filled by the Candidate) Govt. Junior College opp. Govt. Area Hospital Mulugu
NAME AND FULL POSTAL ADDRESS OF THE CANDIDATE		
(to be filled by the Candidate)		
KASARAPU RANJITH KUMAR H.No. 1-72, Near Ramalagan, Mulugu Village and Mandal, Mulugu District, Pin: 506303 Telangana State.		
K. Ranjith Kumar Signature of the Candidate		 Gazetted Officer ZPHS DEPT Mul. & Dist. Mulugu 24170847

SECRETARY
DISTRICT LEGAL SERVICES AUTHORITY,
MULUGU.

ORIGINAL

REGD. No.: 24170848

DISTRICT LEGAL SERVICES AUTHORITY : MULUGU
WRITTEN TEST FOR THE POST OF Record Assistant
HALL TICKET-CUM-IDENTITY SHEET

DATE	TIME	NAME OF THE EXAMINATION CENTER
14/9/25	2:30pm-4pm	Govt. Junior College opp. Govt. Area Hospital Mulugu
NAME AND FULL POSTAL ADDRESS OF THE CANDIDATE		
(to be filled by the Candidate)		
Vankudoth. Sudhakar H.No. 1-7, Chesla thanda, vi) Devagiripatnam Mulugu (M.G.O), 506352. cell-9666885952		
V. Sudhakar. Signature of the Candidate		 Medical Officer PHC NALLABELLY Dist. Warangal

SECRETARY
DISTRICT LEGAL SERVICES AUTHORITY,
MULUGU

DUPLICATE

DISTRICT LEGAL SERVICES AUTHORITY : MULUGU
WRITTEN TEST FOR THE POST OF Record Assistant

HALL TICKET-CUM-IDENTITY SHEET

24170848

DATE	TIME	NAME OF THE EXAMINATION CENTER
14/9/25	2:30pm-4pm	(to be filled by the Candidate) Govt. Junior College opp. Govt. Area Hospital Mulugu
NAME AND FULL POSTAL ADDRESS OF THE CANDIDATE		
(to be filled by the Candidate)		
Vankudoth. Sudhakar H.No. 1-7, Chesla thanda vi) Devagiripatnam Mulugu (M.G.O) 506352. cell-9666885952		
V. Sudhakar. Signature of the Candidate		 Medical Officer PHC NALLABELLY Dist. WARANGAL

SECRETARY
DISTRICT LEGAL SERVICES AUTHORITY,
MULUGU.

ORIGINAL

REGD. No.: 24170849

DISTRICT LEGAL SERVICES AUTHORITY, MULUGU
WRITTEN TEST FOR THE POST OF Record Assistant
HALL TICKET-CUM-IDENTITY SHEET

DATE	TIME	NAME OF THE EXAMINATION CENTER
14/9/25	2:30pm-4pm	Govt. Junior College opp: Govt. Area Hospital mulugu
NAME AND FULL POSTAL ADDRESS OF THE CANDIDATE		
JADI. KIRAN Kumar (to be filled by the Candidate) S/O BABU RAO WADAGUDEM (V), VENKATAPURAM (Md), MULUGU (Dist), Telangana - 501136		
Signature of the Candidate	J. Kiran Kumar INSPECTOR OF POLICE S.H.O. YELLANDU	



SECRETARY
DISTRICT LEGAL SERVICES AUTHORITY,
MULUGU

DUPLICATE

DISTRICT LEGAL SERVICES AUTHORITY, MULUGU
WRITTEN TEST FOR THE POST OF Record Assistant

HALL TICKET-CUM-IDENTITY SHEET

24170849

DATE	TIME	NAME OF THE EXAMINATION CENTER
14/9/25	2:30pm-4pm	(to be filled by the Candidate) Govt. Junior College, opp: Govt. Area Hospital mulugu
NAME AND FULL POSTAL ADDRESS OF THE CANDIDATE		
JADI. KIRAN Kumar (to be filled by the Candidate) S/O BABU RAO WADAGUDEM (V), VENKATAPURAM (Md), MULUGU (Dist), Telangana - 501136		
Signature of the Candidate	J. Kiran Kumar INSPECTOR OF POLICE S.H.O. YELLANDU	



SECRETARY
DISTRICT LEGAL SERVICES AUTHORITY,
MULUGU.

ORIGINAL

REGD. No.: 24170850

DISTRICT LEGAL SERVICES AUTHORITY : MULUGU
WRITTEN TEST FOR THE POST OF Record Assistant -
HALL TICKET-CUM-IDENTITY SHEET

DATE	TIME	NAME OF THE EXAMINATION CENTER
~~15/12/24~~ 14/9/25	~~10 Am~~ 2:30pm-4pm	~~District Court Complex, mulugu~~ <u>Gort. Junior college opp: Gort. Area Hospital mulugu</u>
NAME AND FULL POSTAL ADDRESS OF THE CANDIDATE		
(to be filled by the Candidate)		
Jakkula Koteswara. 1-103, SBI Road Mulugu, mulugu, mulugu. 506343		
J. Koteswara Signature of the Candidate		 CIVIL ASSISTANT SURGEON DISTRICT HOSPITAL MULUGU

SECRETARY
DISTRICT LEGAL SERVICES AUTHORITY,
MULUGU

DUPLICATE

DISTRICT LEGAL SERVICES AUTHORITY : MULUGU
WRITTEN TEST FOR THE POST OF Record Assistant -
HALL TICKET-CUM-IDENTITY SHEET

DATE	TIME	NAME OF THE EXAMINATION CENTER
~~15/12/24~~ 14/9/25	~~10 Am~~ 2:30pm-4pm	~~District Court Complex, mulugu~~ <u>Gort. Junior college opp: Gort. Area Hospital mulugu</u>
NAME AND FULL POSTAL ADDRESS OF THE CANDIDATE		
(to be filled by the Candidate)		
Jakkula Koteswara, 1-103, SBI Road mulugu, mulugu, Mulugu. 506343		
J. Koteswara Signature of the Candidate		 CIVIL ASSISTANT SURGEON DISTRICT HOSPITAL MULUGU

SECRETARY
DISTRICT LEGAL SERVICES AUTHORITY,
MULUGU.

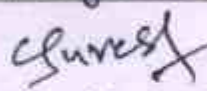
ORIGINAL

REGD. No.: 24170851

DISTRICT LEGAL SERVICES AUTHORITY: MULUGU

WRITTEN TEST FOR THE POST OF Record Assistant

HALL TICKET-CUM-IDENTITY SHEET

DATE	TIME	NAME OF THE EXAMINATION CENTER
14/9/25	2:30pm-4pm	Govt. Junior College, opp: Govt. Area Hospital mulugu
NAME AND FULL POSTAL ADDRESS OF THE CANDIDATE		 Headmaster KOTHUR, pur-506132 arangel
(to be filled by the Candidate) MYSI. SURESH, S. Narasiah 6-92, Gandhi Road, Narasampet Warangal - 506132, 9849047039		
Signature of the Candidate 		

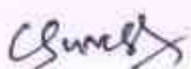
SECRETARY
DISTRICT LEGAL SERVICES AUTHORITY,
Mulugu

DUPLICATE

DISTRICT LEGAL SERVICES AUTHORITY: MULUGU

WRITTEN TEST FOR THE POST OF Record Assistant

HALL TICKET-CUM-IDENTITY SHEET 24170851

DATE	TIME	NAME OF THE EXAMINATION CENTER
14/9/25	2:30pm-4pm	(to be filled by the Candidate) Govt. Junior College, opp: Govt. Area Hospital mulugu
NAME AND FULL POSTAL ADDRESS OF THE CANDIDATE		 Headmaster KOTHUR, pur-506132 Dist: Warangal
(to be filled by the Candidate) MYSI. SURESH, S. Narasiah 6-92, Gandhi Road, Narasampet Warangal - 506132, 9849047039		
Signature of the Candidate 		

SECRETARY
DISTRICT LEGAL SERVICES AUTHORITY,
Mulugu

3
ORIGINAL

REGD. No.: 24170852

DISTRICT LEGAL SERVICES AUTHORITY : MULUGU
WRITTEN TEST FOR THE POST OF Record Assistant
HALL TICKET-CUM-IDENTITY SHEET

DATE	TIME	NAME OF THE EXAMINATION CENTER
14/9/25	2:30pm-4pm	Govt. Junior College, opp: Govt Area Hospital Mulugu
NAME AND FULL POSTAL ADDRESS OF THE CANDIDATE		
(to be filled by the Candidate)		
YERRABELLI RAJU S/O SHANKARAIH V: Pasra Nagarom Govindanagar mulugu. 506347 1-90		
Y. Raju Signature of the Candidate		 Child Development Project Officer ICDS Project, Eturunagaram District: Mulugu

SECRETARY
DISTRICT LEGAL SERVICES AUTHORITY,
MULUGU

DUPLICATE

DISTRICT LEGAL SERVICES AUTHORITY : MULUGU
WRITTEN TEST FOR THE POST OF Record Assistant

HALL TICKET-CUM-IDENTITY SHEET

DATE	TIME	NAME OF THE EXAMINATION CENTER
14/9/25	2:30pm-4pm	(to be filled by the Candidate)
15/12/2024	10:30 am.	Govt. Junior College opp: Govt. Area Hospital Mulugu
NAME AND FULL POSTAL ADDRESS OF THE CANDIDATE		
(to be filled by the Candidate)		
YERRABELLI RAJU S/O SHANKARAIH V: 1-90 Pasra Nagarom Govindanagar mulugu 506347.		
Y. Raju Signature of the Candidate		 Child Development Project Officer ICDS Project, Eturunagaram District: Mulugu

SECRETARY
DISTRICT LEGAL SERVICES AUTHORITY,
MULUGU.

ORIGINAL

REGD. No.: 24170853

DISTRICT LEGAL SERVICES AUTHORITY : MULUGU
WRITTEN TEST FOR THE POST OF RECORD ASSISTANT
HALL TICKET-CUM-IDENTITY SHEET

DATE	TIME	NAME OF THE EXAMINATION CENTER
14/9/25	2:30pm-4pm	Govt Junior College, opp. Govt. Area Hospital Mulugu
NAME AND FULL POSTAL ADDRESS OF THE CANDIDATE		
(to be filled by the Candidate)		
NARESH LIKKI S/o SAMMAIAH. H.NO: 7-181, Gandhinagar(V), Govindhasaopeta(M), Mulugu(CD) Pincode: 506347		
Signature of the Candidate		 District Welfare Officer Women, Children Disabled & Senior Citizens Dept., Mulugu District.

SECRETARY
DISTRICT LEGAL SERVICES AUTHORITY,
MULUGU

DUPLICATE

DISTRICT LEGAL SERVICES AUTHORITY : MULUGU
WRITTEN TEST FOR THE POST OF RECORD ASSISTANT
HALL TICKET-CUM-IDENTITY SHEET

DATE	TIME	NAME OF THE EXAMINATION CENTER
15/9/25	2:30pm-4pm	Govt Junior College opp. Govt. Area Hospital Mulugu
NAME AND FULL POSTAL ADDRESS OF THE CANDIDATE		
(to be filled by the Candidate)		
NARESH LIKKI S/o SAMMAIAH. H.NO: 7-181, Gandhinagar(V), Govindhasaopeta(M), Mulugu(CD). Pincode: 506347		
Signature of the Candidate		 District Welfare Officer Women, Children Disabled & Senior Citizens Dept., Mulugu District.

SECRETARY
DISTRICT LEGAL SERVICES AUTHORITY,
MULUGU.

ORIGINAL

REGD. No.: 24170854

DISTRICT LEGAL SERVICES AUTHORITY : MULUGU
WRITTEN TEST FOR THE POST OF Record Assistant
HALL TICKET-CUM-IDENTITY SHEET

DATE	TIME	NAME OF THE EXAMINATION CENTER
14/9/25	2:30pm-4pm	Govt Junior College opp: Govt. Area Hospital Mulugu
NAME AND FULL POSTAL ADDRESS OF THE CANDIDATE		
(to be filled by the Candidate)		
Narsingam Julavada, Subedari Hanamalakonda P.H. 506002 # 1-9-299		
Signature of the Candidate		



CIVIL ASSISTANT SURGEON
DISTRICT HOSPITAL MULUGU

SECRETARY
DISTRICT LEGAL SERVICES AUTHORITY,
MULUGU

DUPLICATE

DISTRICT LEGAL SERVICES AUTHORITY : MULUGU
WRITTEN TEST FOR THE POST OF Record Assistant

HALL TICKET-CUM-IDENTITY SHEET 24170854

DATE	TIME	NAME OF THE EXAMINATION CENTER
14/9/25	2:30pm-4pm	(to be filled by the Candidate) Govt Junior College opp: Govt. Area Hospital Mulugu
NAME AND FULL POSTAL ADDRESS OF THE CANDIDATE		
(to be filled by the Candidate)		
Narsingam Julavada Subedari Hanamalakonda P.H. 506002 # 1-9-299		
Signature of the Candidate		



CIVIL ASSISTANT SURGEON
DISTRICT HOSPITAL MULUGU

SECRETARY
DISTRICT LEGAL SERVICES AUTHORITY,
MULUGU.

3

ORIGINAL

REGD. No.: 24170855

DISTRICT LEGAL SERVICES AUTHORITY : MULUGU
WRITTEN TEST FOR THE POST OF RECORD ASSISTANT
HALL TICKET-CUM-IDENTITY SHEET

DATE	TIME	NAME OF THE EXAMINATION CENTER
14/9/25	2:30pm-4pm	Govt. Junior College opp. Govt. Area Hospital Mulugu
NAME AND FULL POSTAL ADDRESS OF THE CANDIDATE		
(to be filled by the Candidate)		
GUGULOTH REETHIKA 164-A, Jeevantharopally, mulugu, Telangana, 506343		
G. Reethika Signature of the Candidate		 Civil Surgeon Area Hospital, Mulugu Dist: Mulugu

SECRETARY
DISTRICT LEGAL SERVICES AUTHORITY,
MULUGU

DUPLICATE

DISTRICT LEGAL SERVICES AUTHORITY : MULUGU
WRITTEN TEST FOR THE POST OF RECORD ASSISTANT

HALL TICKET-CUM-IDENTITY SHEET 24170855

DATE	TIME	NAME OF THE EXAMINATION CENTER
14/9/25	2:30pm-4pm	(to be filled by the Candidate) Govt. Junior College opp. Govt. Area Hospital Mulugu
NAME AND FULL POSTAL ADDRESS OF THE CANDIDATE		
(to be filled by the Candidate)		
GUGULOTH REETHIKA 164-A, Jeevantharopally, mulugu, Telangana, 506343		
G. Reethika Signature of the Candidate		 Civil Surgeon Area Hospital, Mulugu Dist: Mulugu

SECRETARY
DISTRICT LEGAL SERVICES AUTHORITY,
MULUGU.

ORIGINAL

REGD. No.:

24170856

DISTRICT LEGAL SERVICES AUTHORITY : MULUGU
WRITTEN TEST FOR THE POST OF Record Assistant
HALL TICKET-CUM-IDENTITY SHEET

DATE	TIME	NAME OF THE EXAMINATION CENTER
14/9/25	2:30pm - 4pm	Gout. Junior College Opp. Govt. Area Hospital Mulugu
NAME AND FULL POSTAL ADDRESS OF THE CANDIDATE		
(to be filled by the Candidate)		
Vankudoth Vasantha H.No:- 5-53 - CHINTHAKUNTA Mulugu - Pathepalle		
Signature of the Candidate	V. Vasantha	



SECRETARY

DISTRICT LEGAL SERVICES AUTHORITY,
MULUGU

DUPLICATE

DISTRICT LEGAL SERVICES AUTHORITY : MULUGU
WRITTEN TEST FOR THE POST OF Record Assistant

HALL TICKET-CUM-IDENTITY SHEET

24170856

DATE	TIME	NAME OF THE EXAMINATION CENTER
(to be filled by the Candidate)		
NAME AND FULL POSTAL ADDRESS OF THE CANDIDATE		
(to be filled by the Candidate)		
Vankudoth Vasantha H.No:- 5-53 - CHINTHAKUNTA Mulugu - Pathepalle		
Signature of the Candidate	V. Vasantha	



SECRETARY

DISTRICT LEGAL SERVICES AUTHORITY,
MULUGU.

3
ORIGINAL

REGD. No.: 24170857

DISTRICT LEGAL SERVICES AUTHORITY : MULUGU
WRITTEN TEST FOR THE POST OF Record Assistant
HALL TICKET-CUM-IDENTITY SHEET

DATE	TIME	NAME OF THE EXAMINATION CENTER
14/9/25	2:30pm-4pm	Govt. Junior College opp. Govt. Area Hospital Mulugu
NAME AND FULL POSTAL ADDRESS OF THE CANDIDATE		
(to be filled by the Candidate)		
Jadi. Ramesh s/o. Sammalah (PO) Thimmampeta (MD) Mangapeta Dist- mulugu. Telangana - 506172		
Signature of the Candidate	J. Ramesh	



ASSISTANT PROFESSOR
Govt. Medical College Mulugu,
Mulugu District.

SECRETARY
DISTRICT LEGAL SERVICES AUTHORITY,
MULUGU

DUPLICATE

DISTRICT LEGAL SERVICES AUTHORITY : MULUGU
WRITTEN TEST FOR THE POST OF Record Assistant

HALL TICKET-CUM-IDENTITY SHEET 24170857

DATE	TIME	NAME OF THE EXAMINATION CENTER
14/9/25	2:30pm-4pm	(to be filled by the Candidate) Govt. Junior College opp. Govt. Area Hospital Mulugu
NAME AND FULL POSTAL ADDRESS OF THE CANDIDATE		
(to be filled by the Candidate)		
JADI. RAMESH s/o. SAMMALAH (PO). THIMMAPETA. (MD) MANGAPETA (DA). MULUGU. TELANGANA 506172		
Signature of the Candidate	J. Ramesh.	



ASSISTANT PROFESSOR
Govt. Medical College Mulugu,
Mulugu District.

SECRETARY
DISTRICT LEGAL SERVICES AUTHORITY,
MULUGU.

ORIGINAL

REGD. No.: 24170858

DISTRICT LEGAL SERVICES AUTHORITY : MULUGU
WRITTEN TEST FOR THE POST OF Record Assistant
HALL TICKET-CUM-IDENTITY SHEET

DATE	TIME	NAME OF THE EXAMINATION CENTER
14/9/25	2:30pm-4pm	Govt Junior College opp: Govt. Area Hospital Mulugu
NAME AND FULL POSTAL ADDRESS OF THE CANDIDATE		
(to be filled by the Candidate)		
VADDEPELLI SATHWIKHA D/o SARANGAPPA H-no: 3-5-103 B.C. Colony Post: May Venkatalapur Dist: Mulugu 506352		
Signature of the Candidate		V. Sathwikha



Handwritten: V. SATHWIKHA
Stamp: Assistant Government Pleader,
Junior Civil Judge Court
Mulugu, Cell: 88977101/102

SECRETARY

DISTRICT LEGAL SERVICES AUTHORITY,
MULUGU

DUPLICATE

DISTRICT LEGAL SERVICES AUTHORITY : MULUGU
WRITTEN TEST FOR THE POST OF Record Assistant

HALL TICKET-CUM-IDENTITY SHEET 24170858

DATE	TIME	NAME OF THE EXAMINATION CENTER
14/9/25	2:30pm-4pm	Govt Junior College opp: Govt. Area Hospital Mulugu
NAME AND FULL POSTAL ADDRESS OF THE CANDIDATE		
(to be filled by the Candidate)		
VADDEPELLI SATHWIKHA D/o SARANGAPPA H-no: 3-5-103 B.C. Colony Post: May Venkatalapur Dist: Mulugu 506352		
Signature of the Candidate		V. Sathwikha



Handwritten: V. SATHWIKHA
Stamp: Assistant Government Pleader,
Junior Civil Judge Court
Mulugu, Cell: 88977101/102

SECRETARY

DISTRICT LEGAL SERVICES AUTHORITY,
MULUGU

ORIGINAL

REGD. No.:

24170859

DISTRICT LEGAL SERVICES AUTHORITY : MULUGU
WRITTEN TEST FOR THE POST OF Record Assistant
HALL TICKET-CUM-IDENTITY SHEET

DATE	TIME	NAME OF THE EXAMINATION CENTER
~~15/12/2024~~ 14/9/25	~~10:30AM~~ 2:30PM-4PM	~~MUL Dist Court~~ Complex MULUGU
NAME AND FULL POSTAL ADDRESS OF THE CANDIDATE		
(to be filled by the Candidate)		
NAME: GATTU SHIREESHA S. RAJIAH V: Laxmidevipet m: Venkatapur D: MULUGU, TELANGANA Pin: 506345		
Signature of the Candidate		G. Shireesha



Medical Officer
PHC NALLABELLY
Dist: VVUANGAL

SECRETARY

DISTRICT LEGAL SERVICES AUTHORITY,
MULUGU

DUPLICATE

DISTRICT LEGAL SERVICES AUTHORITY : MULUGU
WRITTEN TEST FOR THE POST OF Record Assistant

HALL TICKET-CUM-IDENTITY SHEET

DATE	TIME	NAME OF THE EXAMINATION CENTER
~~15/12/2024~~ 14/9/25	~~10:30AM~~ 2:30PM-4PM	~~MUL Dist Court~~ Complex MULUGU
NAME AND FULL POSTAL ADDRESS OF THE CANDIDATE		
(to be filled by the Candidate)		
NAME: GATTU SHIREESHA S. RAJIAH V: Laxmidevipet m: Venkatapur D: MULUGU, TELANGANA Pin: 506345		
Signature of the Candidate		G. Shireesha



Medical Officer
PHC NALLABELLY
Dist: VVUANGAL

SECRETARY

DISTRICT LEGAL SERVICES AUTHORITY,
MULUGU

ORIGINAL

REGD. No.: 24170860

DISTRICT LEGAL SERVICES AUTHORITY : MULUGU
WRITTEN TEST FOR THE POST OF Record Assistant
HALL TICKET-CUM-IDENTITY SHEET

Govt. Junior College
opp: Govt. Area Hospital
Mulugu

DATE	TIME	NAME OF THE EXAMINATION CENTER
~~15-12-2024~~ 10:30		~~Dist Court of~~
14/9/25	2:30pm to 4pm	Mulugu
NAME AND FULL POSTAL ADDRESS OF THE CANDIDATE		
(to be filled by the Candidate)		
BANOTH VASANTHA W/o RAJKUMAR		
H.No. 1-20/2 KANNALGUDEN		
MULUGU - 506352		
Call 8374929263		
Signature of the Candidate		B. Vasantha



Medical Officer
MALLABELLY
Dist. Warangal

SECRETARY
DISTRICT LEGAL SERVICES AUTHORITY,
MULUGU

DUPLICATE

DISTRICT LEGAL SERVICES AUTHORITY : MULUGU
WRITTEN TEST FOR THE POST OF Record Assistant

24170860

HALL TICKET-CUM-IDENTITY SHEET

Govt. Junior College
opp: Govt. Area Hospital
Mulugu

DATE	TIME	NAME OF THE EXAMINATION CENTER
~~15-12-2024~~ 10:30		~~Dist Court of~~
14/9/25	2:30pm to 4pm	Mulugu
NAME AND FULL POSTAL ADDRESS OF THE CANDIDATE		
(to be filled by the Candidate)		
BANOTH VASANTHA W/o RAJKUMAR		
H.No. 1-20/2 KANNALGUDEN		
MULUGU - 506352		
Call 8374929263		
Signature of the Candidate		B. Vasantha



Medical Officer
MALLABELLY
Dist. Warangal

SECRETARY
DISTRICT LEGAL SERVICES AUTHORITY,
MULUGU

3

ORIGINAL

REGD. No.: 24170861

DISTRICT LEGAL SERVICES AUTHORITY : MULUGU
WRITTEN TEST FOR THE POST OF Record assistant
HALL TICKET-CUM-IDENTITY SHEET

DATE	TIME	NAME OF THE EXAMINATION CENTER
~~15/12/2024~~ 10:30 AM 14/09/25 2:30 PM-4 PM		~~District Court~~ complex, mulugu
NAME AND FULL POSTAL ADDRESS OF THE CANDIDATE		
(to be filled by the Candidate)		
Agmeera Rakesh, 4-113, chinnaquaker pally, jaggaunpet, mulugu, 506343		
A Rakesh. Signature of the Candidate		 MEDICAL OFFICER TPHC- RAYANIGUDEM Dist: Mulugu

Govt. Junior College,
opp:- Govt. Area Hospital,
Mulugu.

SECRETARY

DISTRICT LEGAL SERVICES AUTHORITY,
MULUGU

DUPLICATE

DISTRICT LEGAL SERVICES AUTHORITY : MULUGU
WRITTEN TEST FOR THE POST OF Record assistant

HALL TICKET-CUM-IDENTITY SHEET

DATE	TIME	NAME OF THE EXAMINATION CENTER
~~15/12/2024~~ 10:30 AM 14/09/25 2:30 PM-4 PM		~~District Court~~ complex, mulugu.
NAME AND FULL POSTAL ADDRESS OF THE CANDIDATE		
(to be filled by the Candidate)		
Agmeera Rakesh, 4-113, chinnaquaker pally, jaggaunpet, mulugu, 506343		
A Rakesh. Signature of the Candidate		 MEDICAL OFFICER TPHC- RAYANIGUDEM Dist: Mulugu

Govt. Junior College,
opp:- Govt. Area Hospital,
Mulugu.

SECRETARY

DISTRICT LEGAL SERVICES AUTHORITY,
MULUGU.

ORIGINAL

REGD. No.: 24170862

DISTRICT LEGAL SERVICES AUTHORITY : MULUGU
WRITTEN TEST FOR THE POST OF Record Assistant
HALL TICKET-CUM-IDENTITY SHEET

DATE	TIME	NAME OF THE EXAMINATION CENTER
15/12/2024	10:30 AM	District Court complex,
14/09/25	2:30 PM - 4 PM	Mulugu

NAME AND FULL POSTAL ADDRESS OF THE CANDIDATE

(to be filled by the Candidate)

MD. Iqbal, S/o. Md. Afzal, H. No. 9-127,
Azad street, Mulugu, Mulugu.

MD. Qasim

Signature of the Candidate



CHIEF ASSISTANT SURGEON
DISTRICT HOSPITAL, MULUGU

Govt. Junior College,
opp. Govt. Area Hospital,
Mulugu.

SECRETARY
DISTRICT LEGAL SERVICES AUTHORITY,
MULUGU

DUPLICATE

DISTRICT LEGAL SERVICES AUTHORITY : MULUGU
WRITTEN TEST FOR THE POST OF Record Assistant

HALL TICKET-CUM-IDENTITY SHEET

DATE	TIME	NAME OF THE EXAMINATION CENTER
14/09/25	2:30 PM - 4 PM	(to be filled by the Candidate)
15/12/24	10:30 AM	Govt. Junior College, District Court Complex Mulugu

NAME AND FULL POSTAL ADDRESS OF THE CANDIDATE

(to be filled by the Candidate)

MD. Iqbal, S/o. Md. Afzal, H. No. 9-127,
Azad street, Mulugu,

MD. Qasim

Signature of the Candidate



CHIEF ASSISTANT SURGEON
DISTRICT HOSPITAL, MULUGU

opp. Govt. Area Hospital
Mulugu.

SECRETARY
DISTRICT LEGAL SERVICES AUTHORITY,
MULUGU.

ORIGINAL

REGD. No.: 24170863

DISTRICT LEGAL SERVICES AUTHORITY : MULUGU
WRITTEN TEST FOR THE POST OF Relief Assistant
HALL TICKET-CUM-IDENTITY SHEET

DATE TIME NAME OF THE EXAMINATION CENTER

~~15-12-2024~~ 10-30 District Court
14/09/25 2:30PM-4PM Complex, Mulugu.
NAME AND FULL POSTAL ADDRESS OF THE CANDIDATE

(to be filled by the Candidate)

Bhukya Mrinal, s/o Dharam Singh
Ramchandrapur, Mulugu Mandal,
Mulugu District, 506349



Signature of the Candidate

B. Mrinal

SECRETARY

DISTRICT LEGAL SERVICES AUTHORITY,
MULUGU

DUPLICATE

DISTRICT LEGAL SERVICES AUTHORITY : MULUGU
WRITTEN TEST FOR THE POST OF Relief Assistant

HALL TICKET-CUM-IDENTITY SHEET

DATE TIME NAME OF THE EXAMINATION CENTER

~~15-12-2024~~ 10-30 District Court
14/09/25 2:30PM-4PM Complex, Mulugu.
NAME AND FULL POSTAL ADDRESS OF THE CANDIDATE

(to be filled by the Candidate)

Bhukya Mrinal, s/o Dharam Singh
Ramchandrapur, Mulugu Mandal,
Mulugu District, 506349



Signature of the Candidate

B. Mrinal

SECRETARY

DISTRICT LEGAL SERVICES AUTHORITY,
MULUGU.

Govt. Junior College,
OPP- Govt. Area Hospital
Mulugu.

Govt. Junior College
OPP- Govt. Area Hospital
Mulugu.

5

ORIGINAL

REGD. No.: 24170864

DISTRICT LEGAL SERVICES AUTHORITY : MULUGU
WRITTEN TEST FOR THE POST OF Record Assistant
HALL TICKET-CUM-IDENTITY SHEET

DATE	TIME	NAME OF THE EXAMINATION CENTER
15-12-2024	10-30	District Court Complex, mulugu
14/09/25	2:30PM-4PM	Govt. Junior College, opp- Govt. Area Hospital, mulugu.
NAME AND FULL POSTAL ADDRESS OF THE CANDIDATE		
(to be filled by the Candidate)		
Thandala. Jhansi D/o Kistabala # 3-47 vij Nartapur. mnd, SS Tadva, Dist. mulugu. pin code: 506165		
Signature of the Candidate	Thandala. Jhansi	



SECRETARY

DISTRICT LEGAL SERVICES AUTHORITY,
MULUGU

DUPLICATE

DISTRICT LEGAL SERVICES AUTHORITY : MULUGU
WRITTEN TEST FOR THE POST OF Record Assistant

HALL TICKET-CUM-IDENTITY SHEET 24170864

DATE	TIME	NAME OF THE EXAMINATION CENTER
15-12-2024	10-30	District Court Complex, mulugu
14/09/25	2:30PM-4PM	Govt. Junior College, opp- Govt. Area Hospital, mulugu.
NAME AND FULL POSTAL ADDRESS OF THE CANDIDATE		
(to be filled by the Candidate)		
Thandala. Jhansi D/o Kistabala # 3-47 vij Nartapur mnd, SS Tadva, Dist. mulugu. pincode: 506165		
Signature of the Candidate	Thandala. Jhansi	



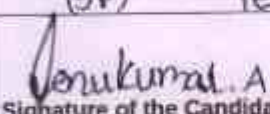
SECRETARY

DISTRICT LEGAL SERVICES AUTHORITY,
MULUGU

ORIGINAL

REGD. No.: 24170865

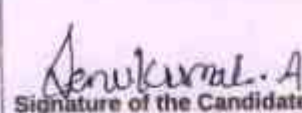
DISTRICT LEGAL SERVICES AUTHORITY : MULUGU
WRITTEN TEST FOR THE POST OF Peon Assistant
HALL TICKET-CUM-IDENTITY SHEET

DATE	TIME	NAME OF THE EXAMINATION CENTER
14/09/25	2:30PM-4PM	Govt Junior College, opp:- Govt Area Hospital, Mulugu.
NAME AND FULL POSTAL ADDRESS OF THE CANDIDATE		
(to be filled by the Candidate)		
ADMEERA: VENUKUMAR (V) No. - LAXMIDEVIPET 5/139 (M) VENKATA PUR (D) MULUGU (St) TELANGANA. PIN. 506345		
 Signature of the Candidate		 M. GOVARDHAN Member in Political Science Govt. Jr. Coll. Venkatapur Mulugu Dist., 506 352

SECRETARY
DISTRICT LEGAL SERVICES AUTHORITY,
MULUGU

DUPLICATE

DISTRICT LEGAL SERVICES AUTHORITY : MULUGU
WRITTEN TEST FOR THE POST OF Record Assistant
HALL TICKET-CUM-IDENTITY SHEET 24170865

DATE	TIME	NAME OF THE EXAMINATION CENTER
14/9/25	2:30PM-4PM	Govt. Junior College, opp:- Govt. Area Hospital, Mulugu.
NAME AND FULL POSTAL ADDRESS OF THE CANDIDATE		
(to be filled by the Candidate)		
ADMEERA: VENUKUMAR (V) No. - 5/139 LAXMIDEVIPET (M) VENKATA PUR (DSt) MULUGU (St) TELANGANA. PIN 506345		
 Signature of the Candidate		 M. GOVARDHAN Govt. Jr. Coll. Venkatapur Mulugu Dist. 506 352

SECRETARY
DISTRICT LEGAL SERVICES AUTHORITY,
MULUGU.

2
ORIGINAL

REGD. No.: 24170866

DISTRICT LEGAL SERVICES AUTHORITY :MULUGU
WRITTEN TEST FOR THE POST OF RECORD ASSISTANT
HALL TICKET-CUM-IDENTITY SHEET

DATE	TIME	NAME OF THE EXAMINATION CENTER
14/9/25	2:30PM-4PM	Govt. Junior College, Opp- Govt. Area Hospital, Mulugu.
NAME AND FULL POSTAL ADDRESS OF THE CANDIDATE		
(to be filled by the Candidate)		
H.No: 2-57, Vill: Laxmidvipet, Md: Venkatapur, Dist: mulugu, Telangana. 506345		
E. Sambaiah Signature of the Candidate		 Assistant Engineer I & CAD Irrigation Section, Inavole.

SECRETARY
DISTRICT LEGAL SERVICES AUTHORITY,
MULUGU

DUPLICATE

DISTRICT LEGAL SERVICES AUTHORITY :MULUGU
WRITTEN TEST FOR THE POST OF RECORD ASSISTANT

HALL TICKET-CUM-IDENTITY SHEET

24170866

DATE	TIME	NAME OF THE EXAMINATION CENTER
14/09/25	2:30PM-4PM	(to be filled by the Candidate) Govt. Junior College, Opp- Govt. Area Hospital Mulugu.
NAME AND FULL POSTAL ADDRESS OF THE CANDIDATE		
(to be filled by the Candidate)		
Encherla Sambaiah H.No: 2-57, Vill: Laxmidvipet, Md: Venkatapur, Dist: mulugu, Telangana, 506345		
E. Sambaiah Signature of the Candidate		 Assistant Engineer I & CAD Irrigation Section, Inavole.

SECRETARY
DISTRICT LEGAL SERVICES AUTHORITY,
MULUGU.

12
ORIGINAL

REGD. No.: 24170867

DISTRICT LEGAL SERVICES AUTHORITY : MULUGU
WRITTEN TEST FOR THE POST OF RECORD ASSISTANT
HALL TICKET-CUM-IDENTITY SHEET

DATE	TIME	NAME OF THE EXAMINATION CENTER
14/12/15	2:30PM-4PM	Govt. Junior college, Opp:- Govt. Area Hospital Mulugu.
NAME AND FULL POSTAL ADDRESS OF THE CANDIDATE		
(to be filled by the Candidate)		
MOHAMMAD FERAZ PASHA H.NO. 9-45, Village, Mandal & Dist- Mulugu		
md. ferazpasha Signature of the Candidate		

SECRETARY
DISTRICT LEGAL SERVICES AUTHORITY,
MULUGU

DUPLICATE

DISTRICT LEGAL SERVICES AUTHORITY : MULUGU
WRITTEN TEST FOR THE POST OF RECORD ASSISTANT

HALL TICKET-CUM-IDENTITY SHEET 24170867

DATE	TIME	NAME OF THE EXAMINATION CENTER
14/12/15	2:30PM-4PM	Govt. Junior college, Opp:- Govt. Area Hospital Mulugu.
NAME AND FULL POSTAL ADDRESS OF THE CANDIDATE		
(to be filled by the Candidate)		
MOHAMMAD FERAZ PASHA H.NO. 9-45, Village, Mandal, & Dist- Mulugu		
md. ferazpasha Signature of the Candidate		

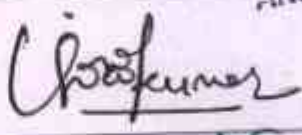
SECRETARY
DISTRICT LEGAL SERVICES AUTHORITY,
MULUGU.

ORIGINAL

REGD. No.:

24170868

DISTRICT LEGAL SERVICES AUTHORITY : MULUGU
WRITTEN TEST FOR THE POST OF RECORD ASSISTANT
HALL TICKET-CUM-IDENTITY SHEET

DATE	TIME	NAME OF THE EXAMINATION CENTER
14/9/25	2:30PM-4PM	Govt. Junior College, Opp. Govt. Area Hospital Mulugu.
NAME AND FULL POSTAL ADDRESS OF THE CANDIDATE		 DISTRICT LEVEL HORTICULTURE AND SERICULTURE OFFICER MULUGU.
(to be filled by the Candidate) VARADABOINA VINOD KUMAR GANNAVARAM WYRA KHAMMAM - 507165		
Signature of the Candidate		

SECRETARY
DISTRICT LEGAL SERVICES AUTHORITY,
MULUGU

DUPLICATE

DISTRICT LEGAL SERVICES AUTHORITY : MULUGU
WRITTEN TEST FOR THE POST OF RECORD ASSISTANT

HALL TICKET-CUM-IDENTITY SHEET

24170868

DATE	TIME	NAME OF THE EXAMINATION CENTER
15/9/25	10:30AM	District Court Complex, Mulugu.
14/09/25	2:30PM-4PM	Govt. Junior College, Opp. Govt. Area Hospital, Mulugu.
NAME AND FULL POSTAL ADDRESS OF THE CANDIDATE		 DISTRICT LEVEL HORTICULTURE AND SERICULTURE OFFICER MULUGU.
(to be filled by the Candidate) VARADABOINA VINOD KUMAR GANNAVARAM WYRA KHAMMAM - 507165		
Signature of the Candidate		

SECRETARY
DISTRICT LEGAL SERVICES AUTHORITY,
MULUGU.

ORIGINAL

REGD. No.: 24170869

DISTRICT LEGAL SERVICES AUTHORITY :MULUGU
WRITTEN TEST FOR THE POST OF Record Assistant
HALL TICKET-CUM-IDENTITY SHEET

DATE	TIME	NAME OF THE EXAMINATION CENTER
14/9/25	2:30pm-4pm	Govt. Junior College, opp:- Govt. Area Hospital, Mulugu.
NAME AND FULL POSTAL ADDRESS OF THE CANDIDATE		
(to be filled by the Candidate)		
4-52/2, Ramnagar, Dumpeelligudem, Grovindasapet, Mulugu, 506344		
Signature of the Candidate		 Veterinary Assistant Surgeon Primary Veterinary Center Vill: LAXMI DEVI PET Mdl: Venkatapur, Dist: Mulugu

SECRETARY
DISTRICT LEGAL SERVICES AUTHORITY,
MULUGU

DUPLICATE

DISTRICT LEGAL SERVICES AUTHORITY : MULUGU
WRITTEN TEST FOR THE POST OF Record Assistant

HALL TICKET-CUM-IDENTITY SHEET 24170869

DATE	TIME	NAME OF THE EXAMINATION CENTER
14/9/25	2:30pm-4pm	Govt. Junior College, opp:- Govt. Area Hospital, Mulugu.
NAME AND FULL POSTAL ADDRESS OF THE CANDIDATE		
(to be filled by the Candidate)		
4-52/2, Ramnagar, Dumpeelligudem, Grovindasapet, Mulugu, 506344		
Signature of the Candidate		 Veterinary Assistant Surgeon Primary Veterinary Center Vill: LAXMI DEVI PET Mdl: Venkatapur, Dist: Mulugu

SECRETARY
DISTRICT LEGAL SERVICES AUTHORITY,
MULUGU.

ORIGINAL

REGD. No.: 24170870

DISTRICT LEGAL SERVICES AUTHORITY : MULUGU
WRITTEN TEST FOR THE POST OF Record Assistant
HALL TICKET-CUM-IDENTITY SHEET

DATE	TIME	NAME OF THE EXAMINATION CENTER
14/9/25	2:30PM-4PM	Govt. Junior College, OPP- Govt. Area Hospital Mulugu.
NAME AND FULL POSTAL ADDRESS OF THE CANDIDATE		
(to be filled by the Candidate)		
ALAKUNTA BHANUCHANDER, S/o Balaiah H: NO: 469, vill Keshavapur, mll, Venkatapur Dist: MULUGU, Pin: 506 343.		
Signature of the Candidate		 Head & Chairman Board of Studies Dept. of Political Science Univ. Arts & Science College (Autonomous) Subedari, K.U. Warangal-506 001
A. Bhanu		

SECRETARY
DISTRICT LEGAL SERVICES AUTHORITY,
MULUGU

DUPLICATE

DISTRICT LEGAL SERVICES AUTHORITY : MULUGU
WRITTEN TEST FOR THE POST OF Record Assistant

HALL TICKET-CUM-IDENTITY SHEET 24170870

DATE	TIME	NAME OF THE EXAMINATION CENTER
14/9/25	2:30PM-4PM	Govt. Junior College, OPP- Govt. Area Hospital, Mulugu.
NAME AND FULL POSTAL ADDRESS OF THE CANDIDATE		
(to be filled by the Candidate)		
ALAKUNTA BHANUCHANDER, S/o Balaiah H: NO: 4-69 vill Keshavapur, mll, Venkatapur Dist: MULUGU, Pin: 506 343.		
Signature of the Candidate		 Head & Chairman Board of Studies Dept. of Political Science Univ. Arts & Science College (Autonomous) Subedari, K.U. Warangal-506 001
A. Bhanu		

SECRETARY
DISTRICT LEGAL SERVICES AUTHORITY,
MULUGU.

ORIGINAL

REGD. No.: 24170871

DISTRICT LEGAL SERVICES AUTHORITY : MULUGU
WRITTEN TEST FOR THE POST OF RECORD ASSISTANT
HALL TICKET-CUM-IDENTITY SHEET

DATE	TIME	NAME OF THE EXAMINATION CENTER
14/9/25	2:30pm-4pm	Govt. Junior College, OPPI- Govt. Area Hospital Mulugu.
NAME AND FULL POSTAL ADDRESS OF THE CANDIDATE		
(to be filled by the Candidate)		
KOYYALA VENNELA, H.NO:- 55-3-160/103/3 Bhadrakali Nagar-1, Komati pally, Gopabp Mdl: & Dist: Hanumakonda 506001		
Signature of the Candidate		

SECRETARY
DISTRICT LEGAL SERVICES AUTHORITY,
MULUGU

DUPLICATE

DISTRICT LEGAL SERVICES AUTHORITY : MULUGU
WRITTEN TEST FOR THE POST OF RECORD ASSISTANT

HALL TICKET-CUM-IDENTITY SHEET 24170871

DATE	TIME	NAME OF THE EXAMINATION CENTER
14/9/25	2:30pm-4pm	Govt. Junior College, OPPI- Govt. Area Hospital Mulugu.
NAME AND FULL POSTAL ADDRESS OF THE CANDIDATE		
(to be filled by the Candidate)		
KOYYALA VENNELA, H.NO: 55-3-160/103/3 Bhadrakali Nagar -1, Komati pally, Gopabp Mdl: & Dist: Hanumakonda - 506001		
Signature of the Candidate		

SECRETARY
DISTRICT LEGAL SERVICES AUTHORITY,
MULUGU,

3

ORIGINAL

REGD. No.: 24170872

DISTRICT LEGAL SERVICES AUTHORITY : MULUGU
WRITTEN TEST FOR THE POST OF Record Assistant
HALL TICKET-CUM-IDENTITY SHEET

DATE	TIME	NAME OF THE EXAMINATION CENTER
14/9/25	2:30PM-4PM	Govt Junior College, Opp. Govt Area Hospital, Mulugu.
NAME AND FULL POSTAL ADDRESS OF THE CANDIDATE		
(to be filled by the Candidate)		
Baroth Anusha D/o Shyamal Nayak 7-240 Venkatapur, Venkatapur Mulugu Telangana 506352		
Signature of the Candidate		B. Anusha



Officer
PAGNALLABELLY
Dist. WARANGAL

SECRETARY
DISTRICT LEGAL SERVICES AUTHORITY,
MULUGU

DUPLICATE

DISTRICT LEGAL SERVICES AUTHORITY : MULUGU
WRITTEN TEST FOR THE POST OF Record Assistant

HALL TICKET-CUM-IDENTITY SHEET 24170872

DATE	TIME	NAME OF THE EXAMINATION CENTER
14/9/25	2:30PM-4PM	(to be filled by the Candidate) Govt Junior College Opp. Govt Area Hospital Mulugu.
NAME AND FULL POSTAL ADDRESS OF THE CANDIDATE		
(to be filled by the Candidate)		
Baroth Anusha D/o Shyamal Nayak 7-240 Venkatapur, Venkatapur Mulugu Telangana 506352		
Signature of the Candidate		B. Anusha



Officer
PAGNALLABELLY
Dist. WARANGAL

SECRETARY
DISTRICT LEGAL SERVICES AUTHORITY,
MULUGU.

5

ORIGINAL

REGD. No.: 24170873

DISTRICT LEGAL SERVICES AUTHORITY :MULUGU
WRITTEN TEST FOR THE POST OF Record Assistant
HALL TICKET-CUM-IDENTITY SHEET

DATE	TIME	NAME OF THE EXAMINATION CENTER
14/9/25	2:30pm-4pm	Govt. Junior College opp: Govt. Area Hospital Mulugu
NAME AND FULL POSTAL ADDRESS OF THE CANDIDATE		
(to be filled by the Candidate)		
Porika Jagadish s/o Ratan Singh H.No. 3-6 Annampally Jagannapet Mulugu Telangana 506343		
Signature of the Candidate		
		Officer P. N. NALLABELLY Dist. WARANGAL

SECRETARY
DISTRICT LEGAL SERVICES AUTHORITY,
MULUGU

DUPLICATE

DISTRICT LEGAL SERVICES AUTHORITY :MULUGU
WRITTEN TEST FOR THE POST OF Record Assistant

HALL TICKET-CUM-IDENTITY SHEET

24170873

DATE	TIME	NAME OF THE EXAMINATION CENTER
14/9/25	2:30pm-4pm	(to be filled by the Candidate) Govt. Junior College opp: Govt. Area Hospital Mulugu
NAME AND FULL POSTAL ADDRESS OF THE CANDIDATE		
(to be filled by the Candidate)		
Porika Jagadish s/o Ratan Singh H.No. 3-6 Annampally Jagannapet Mulugu Telangana. 506343.		
Signature of the Candidate		
		Officer P. N. NALLABELLY Dist. WARANGAL

SECRETARY
DISTRICT LEGAL SERVICES AUTHORITY,
MULUGU.

4

ORIGINAL

REGD. No.: 24170874

DISTRICT LEGAL SERVICES AUTHORITY : MULUGU
WRITTEN TEST FOR THE POST OF Record Assistant
HALL TICKET-CUM-IDENTITY SHEET

DATE	TIME	NAME OF THE EXAMINATION CENTER
14/9/25	2:30pm-4pm	Gout. Junior College opp. Gout. Area Hospital Mulugu
NAME AND FULL POSTAL ADDRESS OF THE CANDIDATE		
(to be filled by the Candidate)		
NAME: THOKALA MAHENDER		
ADDRESS: H.NO: 9-120, HANUMAN COLONY, MULUGU, MULUGU, TELANGANA. 506343		
Signature of the Candidate		 Junior civil Judge Court Mulugu Cell: 8897710164
		

SECRETARY
DISTRICT LEGAL SERVICES AUTHORITY,
MULUGU

DUPLICATE

DISTRICT LEGAL SERVICES AUTHORITY : MULUGU
WRITTEN TEST FOR THE POST OF Record Assistant

HALL TICKET-CUM-IDENTITY SHEET 24170874

DATE	TIME	NAME OF THE EXAMINATION CENTER
14/9/25	2:30pm-4pm	Gout. Junior College opp. Gout. Area Hospital Mulugu
NAME AND FULL POSTAL ADDRESS OF THE CANDIDATE		
(to be filled by the Candidate)		
NAME: THOKALA MAHENDER		
ADDRESS: H.NO: 9-120, HANUMAN COLONY, MULUGU, MULUGU, TELANGANA. 506343		
Signature of the Candidate		 Assistant Government Pleader Junior civil Judge Court Mulugu Cell: 8897710164
		

SECRETARY
DISTRICT LEGAL SERVICES AUTHORITY,
MULUGU.