

Most Immediate

No. Per (AR) F (7)-2/98. Vol. I
Government of Himachal Pradesh
Administrative Reforms Organization

From

The Principal Secretary (AR) to the
Government of Himachal Pradesh.

To

1. All the Administrative Secretaries to the Government of Himachal Pradesh.
2. All the Heads of Departments in Himachal Pradesh.
3. All the Divisional Commissioners in Himachal Pradesh.
4. All the Deputy Commissioners in Himachal Pradesh.
5. All the Managing Directors/ Chief Executive Officers of Corporations & Boards in HP
6. All Registrars of Universities in HP

Dated Shimla-171002, the **03-04-2006**

Subject:- Furnishing the list of all the Public Information Officers/ Assistant Public Information Officers.

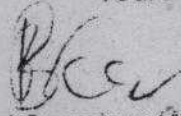
Sir,

I am directed to refer to this Departments' letter of even number dated 09.09.2005 vide which you have been asked to designate the Public Information Officers under section 5(1) and Assistant Public Information Officers under section 5(2) of the Right to Information Act, 2005, at State, District and other appropriate levels to provide information to persons requesting for the information under the Right to Information Act, 2005. Besides this you have also been asked in the same letter referred to above to designate the Appellate Authority under section 19(1) of the Act.

You are requested to send a complete list of PIOs/APIOs and Appellate Authority concerning your Department to this department at your earliest

on the attached proforma separately for District level and State level. Soft copy of
the list may also be sent alongwith the list and the list may be uploaded to the
State Government's/ Department's website also, in compliance with the provisions
of the Act.

Yours faithfully,



Special Secretary (AR) to the
Government of Himachal Pradesh.

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STATE LEVEL PROFORMA

DEPARTMENT/PUBLIC AUTHORITY _____

Sl.No.	Name of Appellate Authority	Designation & Office address	Jurisdiction [area/subject]	e-mail (if any)	Telephone/fax number (Office) (Resi.)
1.	2.	3.	4.	5.	6.

STATE LEVEL PROFORMA

DEPARTMENT/PUBLIC AUTHORITY _____

Sl.No.	Name of PIC/APIO	Designation & Office address	Jurisdiction [area/subject]	e-mail (if any)	Telephone/fax number (Office) (Resi.)
1.	2.	3.	4.	5.	6.

DISTRICT LEVEL PROFORMA

DEPARTMENT/PUBLIC AUTHORITY _____

DISTRICT _____

Sl.No.	Name of PIO/APIO	Designation & Office address	Jurisdiction [area/subject]	e-mail (if any)	Telephone/fax number (Office) (Resi.)
1.	2.	3.	4.	5.	6.