

POST CARD
FORM E.I.B.-F
ON UTTAR PRADESH SERVICE

No. E.I.B./H.S. _____ , Address only _____
date _____

Reference your No. _____ , The Excise Inspector.
dated _____ Station Officer

Circle
Police Station

Regarding _____

A Prominent Offender in an Important
Excise Case.

Please not details given on the reverse.

P.O. _____

District _____

Assistant Excise Commissioner,
E.I.B.,
For Excise Commissioner, U.P.

REVERSE

District _____

1. Name of accused _____

2. Father's Name _____

3. Resident of Village/Mohall/Town _____

4. Detected on _____

5. By _____(Name of Detecting Officer) _____

(Designation)

6. With _____(Contraband seized) is registered as follows :

(i) E.I.B.-1 _____

(ii) E.I.B.-2 _____

Please note that History –Sheet No. _____ of _____is closed.

Assistant Excise Commissioner,
E.I.B.
For Excise Commissioner, U.P.

(Score out, if not required)

