DECLARATION FORM

I son of	, holder of CNIC No	hereb
declare that concealment or mis-representation	of facts at any stage will lead to disq	ualification of m
candidature against the post of Chief Law Officer	r FESCO.	
	Signature:	
Date:	Full Name (in B Designation, N and Full Ad	IIC Number,
Place:		
	Atteste	ed by
	An oath Com [under his	
Witness to the signature:		
Signature:		
Full Name, Father's/ Husband's Name (in Block Letters)		
NIC Number,		
Occupation Full		
Address		

Note: To be made on stamp paper of requisite amount duly verified by Oath Commissioner