

**GOVERNMENT OF ANDRHA PRADESH  
ABSTRACT**

Public services – Service Book – Maintenance of Service Book – Replacing the existing Service Book with e-Service Book – Amendment to Fundamental Rules provisions – Orders – Issued.

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**FINANCE (HR-II - FR) DEPARTMENT**

G.O.MS.No. 99

Dated: 27-06-2018  
Read the following:

1. G.O.Ms.No.200, Finance & Planning (FW.FR.I) Dept., dt.10.12.1999
2. Office Memo No.F.No.21011/15/2010-Estt.(Allowance), GoI, Ministry of Personnel, Public Grievance & Pensions Department of Personnel & Training, New Delhi, dt.05.04.2016.

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**ORDER:**

According to Rules 1 and 2, Annexure II, Part III read with Fundamental Rule 74(a)(iv) of the Fundamental Rules, Service Book as prescribed in Form No. 10 of AP Fundamental Rules as amended in the orders first read above has to be opened for Gazetted and Non - Gazetted employees of the Government.

2. In the reference second read above, the Government of India have communicated a proposal to modernize the service Book to make it user friendly.

3. Government after careful consideration hereby order adoption e Service Book for the use of all Government employees to whom Fundamental Rules apply.

4. All the Government employees shall have e Service Book. The Service Books of existing employees shall be replaced with e Service Books. The Heads of Offices/ Heads of Departments who maintains Service Books of the employees shall update all the entries in the new format of e Service Book by 31-08-2018.

5. The following notification will be published in the Andhra Pradesh Gazette:

**NOTIFICATION**

In exercise of the powers conferred by the provision to Article 309 read with article 313 of the Constitution of India, the Governor of Andhra Pradesh hereby makes the following amendment to the Andhra Pradesh Fundamental Rules, namely :-

**AMENDMENT**

In the said Fundamental Rules, for Form 10 under Part IV of Annexure II, the following form of e Service Book shall be substituted.

**SERVICE BOOK**

## Contents

PART - 1	PERSONAL DETAILS
PART - 2	CERTIFICATES
PART - 3	SERVICE DETAILS
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PART - 5	LEAVE DETAILS
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PART - 7	INTEREST BEARING ADVANCES DETAILS
PART - 8	GROUP INSURANCE SCHEME DETAILS
PART - 9	SERVICE VERIFICATION DETAILS
PART - 10	DEPARTMENTAL TESTS AND TRAININGS DETAILS
PART - 11	INCENTIVES AND PUNISHMENTS DETAILS
PART - 12	PENSION PROPOSALS

**PART 1. PERSONAL DETAILS**

1.	Name & Surname	
2.	Sex	<input type="checkbox"/> Male <input type="checkbox"/> Female <input type="checkbox"/> Transgender
3.	Service	
4.	Post Category	
5.	Employee ID	
6.	CFMS Employee ID	

(immutable)

**7. Photo**

Photo at time of appointment	Photo after completing 18 years of service	Photo 12 months before date of retirement	Photo with spouse 12 months before retirement

**8. Aadhar Number**

--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--

 Upload
**9. Father/Mother/Spouse Name:****10. Place of Birth :****11. Date of Birth**

Date		Month		Year			

(immutable)

Enter from calendar Upload SSC certificate

**12. Date of Superannuation:**  
(immutable)

Date		Month		Year			

**13. Type of retirement:**

(To upload medical certificate in case of medical invalidation)

14. **Nationality** : Indian  
(immutable)

15. **Category** :  SC  ST  BC  Others

16. **Differently abled** :  Yes  No (If yes  
Upload i)  
Medical  
Certificate  
and ii)  
Appointment  
of Guardian)

**17. Family Details :**

S. No	Name of family member	UID & Mobile No.	Date of birth	Relationship (Spouse/Son/ Daughter/ Mother/ Father / Other dependent)	Date of marriage if married	Details of employment	Details of Death/ Divorce etc if any	Specimen signature	Left thumb impression

Upload bigamy declaration if any:

**18. Education**

Qualification	From	To	School/ College/ Institute	Location	
SSC/10 <sup>th</sup> Class					Upload certificate
Intermediate/ 12 <sup>th</sup> Class					Upload certificate
Graduation					Upload certificate
Post Graduation					Upload certificate
PhD					Upload certificate
+ Other					Upload certificate

**Upload Local Status Certificate**

**19. Address**

Permanent Address:

Pin code:

Communication Address:

Pin code:

Mobile 1:

Mobile 2:

Email 1:

Email 2:

**20. Home Town**

Date DD/MM/YYYYY	Home town	Nearest railway station	Nearest airport	Attachment
On date of joining service (immutable)				
				Upload orders

**21. Account numbers**

(i)

Bank	Branch Name	IFSC Code	Account Number	Upload front page of Bank pass book of savings account

(ii) PAN number : (upload copy)

(iii) Provident Fund Account number: (upload copy)

(iv) PRAN number : (upload copy)

(v) A.P.G.L.I. : (upload copy)

**22. Identification**

**Identification marks** : 1. (upload SSC certificate)  
2.

Height (cm) :

**23. Left Thumb Impression of Government servant**

**Digital Signature of the Employee**

## PART 2. CERTIFICATES

### IMMUTABLE CERTIFICATES:

Sl.N	Subject	Certificate	
1	<b>Medical Examination</b>	<input type="checkbox"/> Employee medically examined on and found fit. <input type="checkbox"/> Original medical certificate kept in safe custody of authority	Upload medical certificate
2	<b>Character and antecedents</b>	<input type="checkbox"/> Character and antecedents of employee are verified. <input type="checkbox"/> Verification report kept in safe custody of authority	Upload police verification report
3	<b>Allegiance to the Constitution</b>	<input type="checkbox"/> Employee has taken the oath of allegiance/affirmation to the Constitution. <input type="checkbox"/> Form kept in safe custody of authority	Upload filled-up form attested by head of office
4	<b>Oath of Secrecy</b>	<input type="checkbox"/> Employee has read the Official Secrets Act and Andhra Pradesh (CCA) Rules and has taken the oath of secrecy. <input type="checkbox"/> Form kept in safe custody of authority	Upload filled-up form attested by head of office

### MUTABLE CERTIFICATES:

#### 5. Nominations

##### (i) Family Particulars

Date	upload Certificate

##### (ii) Original or alternative nominees for GPF/ PRAN

Date	Upload Certificate

##### (iii) Descriptive Roles

Fill the Form 1 in Part 12 before 12 months prior to retirement.

**(iv) DCR Gratuity and Family pension**

Fill the Form 2 in Part 12. Fill once at the time of joining. Fill fresh form when there are changes.

**(v) Details of Immovable Property Possessing at the time of Entry into Government Service and Acquired/Disposed subsequently (to be uploaded periodically):****PART-3. SERVICE DETAILS****1. Appointment and Posting details**

Order No. and Date	Secretariat Department/ Head of the Department/ others/ Autonomous Organization	Post	Nature	Date of Joining & Time
			<input type="checkbox"/> Permanent <input type="checkbox"/> Officiating	
			<input type="checkbox"/> Permanent <input type="checkbox"/> Officiating	Upload orders

**Grant in Aid post:**

- i) (Upload GIA certificate of teachers/Lecturers of Aided Schools and Colleges) pay to be re-fixed from the date of GIA (Minimum of the time scale Act 37)
- ii) Any G.O issued to consider consolidated pay for pensionary benefits in case of teachers.

**2. Details of Service Regularization and Declaration of Probation:**

Services Regularized w.e.f	Cadre	Under Rule	Under Service	Period of Probation

Date of declaration of probation	If the probation period is extended the reasons thereof	
DD/MM/YYYYYY		Upload confirmation order

**3. Transfer details**

Order No. and Date	Secretariat Department/ Head of the Department/ other/ Autonomous Organization	From		To		
		Post	Nature	Post	Nature	
			<input type="checkbox"/> Permanent <input type="checkbox"/> Officiating		<input type="checkbox"/> Permanent <input type="checkbox"/> Officiating	
			<input type="checkbox"/> Permanent <input type="checkbox"/> Officiating		<input type="checkbox"/> Permanent <input type="checkbox"/> Officiating	Upload orders

Date of Relief	Leave availed Before joining if any	Transit Period	Date of Joining in new post

**4. Foreign Service details if any**

Orders and Date	Deputed to	Relieved	Extension orders if any	Re-joining into regular service

Upload orders

Period		Leave salary contribution	Pension contribution
From	To		
DD/MM/YYYY	DD/MM/YYYY		

**5. Promotion details**

Order No. and Date	Secretariat Department/ Head of the Department/ others/ Autonomous Organization	From		To		Date of Joining & Time
		Post	Nature	Post	Nature	
			<input type="checkbox"/> Permanent <input type="checkbox"/> Officiating		<input type="checkbox"/> Permanent <input type="checkbox"/> Officiating	
			<input type="checkbox"/> Permanent <input type="checkbox"/> Officiating		<input type="checkbox"/> Permanent <input type="checkbox"/> Officiating	Upload orders

\*\* If promotion is within two (2) months of date of retirement, whether, against clear vacancy or not :

Yes       No       NA



**6. Reversions If Any**

Order No. and Date	Secretariat Department/ Head of the Department/ others/ Autonomous Organization	From		To		Date of Joining & Time
		Post	Nature	Post	Nature	
			<input type="checkbox"/> Permanent <input type="checkbox"/> Officiating		<input type="checkbox"/> Permanent <input type="checkbox"/> Officiating	
			<input type="checkbox"/> Permanent <input type="checkbox"/> Officiating		<input type="checkbox"/> Permanent <input type="checkbox"/> Officiating	Upload orders

**7. Suspension Details**

Suspension		Regularization		Upload orders
From	To	As on duty	Not on Duty	

**8. Leave Salary Particulars**

Government/ Autonomous Organization	Period		Government/ Agency to which debitable	Upload orders
	From	To		

**9. Qualifying service for pension**

Date of commencement of service qualifying for pension <b>DD/MM/YYYYY</b>	Qualify Service	Non-qualifying service if any; (specify the provision)	Net Qualify Service
			Upload orders

## PART 4. PAY DRAWN DETAILS

### 1. Salary details

#### (i) Annual increment details:

DD/MM/ YYYY	Secretariat Department/ Head of the Department/ Autonomous Organization	Substantive Post		Officiating Post		Increment	Other emoluments		Upload orders
		Post	Scale of Pay	Post	Additional Pay		Emolument	Pay	

#### (ii) Stoppage of increments if any;

upload order

#### (iii) Regulation of Pay due to awarding punishment/disciplinary action:

upload order

### 2. Details of salaries paid to the employee:

#### i. Emoluments (only when there is change in Pay due to release of increment)

Date DD/MM/YYYY	Pay	SP/F.P./PP	DA	HRA	Other allowances	CCA	Total

#### ii. Deductions and Net salary

GPF/CPS	APGLI	GIS	EHS	IT	PT	Others	Loans and Advances	Gross	Total deductions	Net

### 3. Pay fixation details (on promotion/AAS):

Date of promotion/AAS DD/MM/ YYYY	Scale of pay	Basic pay	Date of option for fixation of pay (upload fixation statement)	Pay fixed Auto calculation	Date of next increment

**4. Details of pay fixed under PRC:**

Date of promotion/AAS DD/MM/ YYYY	Scale of pay	Basic pay	Date of option for fixation of pay (upload fixation statement)	Pay fixed Auto calculation	Date of next increment

**5. Surrender of Leave details:**

Order No. & Date	Period & No. of days	Leave balance after surrender	Amount paid	Upload order

**6. Subsistence Allowance Details:**

Sanctioned Amount			Emoluments drawn				Remarks
% of Pay	From	To	DA	HRA	CCA	Special Pay	
							Upload orders

**7. Details of New Pension Scheme:****8. Signatures: (for each upload)**

Date	Establishment concerned	DDO	Head of Office

**PART 5. LEAVE DETAILS****1. Casual Leave (CL/OH)**

Year	Leave at Credit	Debited					Grounds			Balance	
		From	FN/AN	To	FN/AN	Total days	Personal	Medical	Other		
											Upload order

Note: This table is not applicable for physical registers.



**6. Paternity Leave**

Issue	Permitted days as per Rule	Sanctioned			
		From	To	Total	
1 <sup>st</sup> Issue					Upload order
2 <sup>nd</sup> Issue					Upload order

**7. Extra-ordinary Leave (EoL)**

Leave Aailed			Grounds			
From	To	Total	Personal	Medical	Against regularization suspension/ Dies-non	
						Upload order

**8. Study Leave**

Leave Aailed			Name of Course (Scientific/Technical)	
From	To	Total		
				Upload order

**9. Other Leave if any**

Type	Aailed			Ground	
	From	To	Total		
					Upload order

**10. Compulsory Wait if any:**

Order No. & Date	Waiting period		Ground	Regularization orders	Upload orders
	From	To			



**4. Computer Advance**

Sanction order No. & Date	Amount Sanctioned				Amount Drawn			Amount Recovered				Upload order	
	Purpose	Int. rate	Amount (Rs.)	No of instalments	Voucher No/Dt	Date	Amount (Rs)	Voucher No	Prl/Int (P) (Rs)	Balance (Rs)	DDO Sign	Sanction order	Formalities fulfilled certificate

**5. Marriage Advance**

Sanction order No. & Date	Amount Sanctioned				Amount Drawn			Amount Recovered				Upload order	
	Purpose (self /Daughter/Son)	Int. rate	Amount (Rs.)	No of instalments	Voucher No/Dt	Date	Amount (Rs)	Voucher No	Prl/Int (P) (Rs)	Balance (Rs)	DDO Sign	Sanction order	Formalities fulfilled certificate

**6. Clearance Certificate**

Upload certificate

### PART 8. GROUP INSURANCE SCHEME DETAILS

Date of joining Government service	Date of admission to the GIS scheme	Group to which admitted	Rate of monthly contribution	From	To	Remarks
						Subscription @ appropriate to the group recovered from pay and allowances for the period from Jan to Dec

### PART 9. SERVICE VERIFICATION DETAILS

**1. GPF Details:**

- (i) Date of Joining into service:
- (ii) Date of Admission to GPF:
- (iii) GPF No.: (Upload copy)

Month & year	Monthly Subscription	GPF Advance Sanctioned if any (upload order)	Monthly Recovery of Advance	Part final withdrawal sanctioned (Upload Order)	Balance

**2. CPS Details:**

- (i) Date of Joining into service:
- (ii) PRAN No: (Upload copy)

Month & year	Employee Subscription		Government Contribution		Total
	Monthly	Arrears	Monthly	Arrears	



**3. Verification of Services by HoD**

Date of verification		Verification of service Period (from dd/mm/yyyy to dd/mm/yyyy)	Details of compliance of observation of audit, if any.	Signatures	
By concerned establishment	By DDO			Establishment	DDO

**4. Internal Audit by A.G.**

Date of verification	Verification Period (yyyy to yyyy)	Comments of Internal Audit	Details of compliance of observation of audit.	Signature of Audit Officer

**PART 10. DEPARTMENTAL TESTS AND TRAINING DETAILS****A. Tests**

Name of the Test	Name of the Exam	Date of passing	
			Upload orders

**B. Trainings Details**

Name of the Training	Training Centre and Conducted by	Period of Training From To	Remarks if any
			Upload orders

**PART 11. INCENTIVES AND PUNISHMENTS DETAILS****1. Incentives/Awards/Rewards/ Seva Patakam if any**

Incentives/ Awards	Period		Details	Date	
	From	To			
					Upload orders

## 2. Punishments

Punish-ments	Period		Period treated as			Withholding of increment		Reduction of Increment	Censure	Dismissal / Removal	Recovery under RR Act	
	From	To	On duty	On leave	Dies non	Without cumulative	With cumulative					
												Upload orders

## PART 12. PENSION PROPOSALS

1. **Forwarding Office:**
2. **Pension Case reference No:**
3. **Date:**
4. **Pension papers submitted by employee (for commutation purpose):**
5. **If there is any other pension (ex-servicemen):**
6. **Treasury:**
7. **Time Limit:**
8. (i) **Employee Name and ID No. (auto populate):**

(tick mark one or more)	Name	Surname	UID	Mobile No./ Email Id
Employee				
Spouse				
Eligible family member as per pension rules				
1.				
2.				

- (ii) Date of birth of employee (auto populate from part-I)
- i. Date of retirement (auto populate from part-I)
  - ii. Type of retirement  Superannuation
    - Voluntary
    - Compulsory
    - Medical Invalidation (upload medical certificate)
    - Others (Specify)

## 9. Death of employee:

Date of death in case of family pension:

- i. Attach death certificate
- ii. Attach family members certificate from MRO
- iii. Attach guardianship certificate from Pension Sanctioning Authority (In case of minor /mentally retarded children)

**10. Pay Rules:**

Pay Rules applicable: Date of effect

**11. Pension Rules:**

Pension Rules applicable:

**12. Place of payment:**

- (i) Name of DTO/STO
- (ii) Bank Account details

**13. Total Qualifying Service:** (from yyyy/mm/dd to yyyy/mm/dd)

- (i) Service in combined state of Andhra Pradesh:
- (ii) Service in new state of Andhra Pradesh:
- (iii) Service in Telangana State, if any:
- (iv) Weightage u/r 29 of AP Revised Pension Rules, 1980:
- (v) Non Qualifying Service:
  - (a) Suspension not regularized
  - (b) EOL on Private affairs
  - (c) Dies Non
  - (d) Any other service which does not count.

**14. Willingness for Commutation of Pension (optional):**

Percentage:

**15. Pension Calculation:**

- (i) Death cum Retirement Gratuity:
  - (a) With held:
  - (b) Recovery (HoA to be specified)
  - (c) Reason
  - (d) Death Gratuity Shares (if any)
- (ii) Commutation
  - a. Percentage:
  - b. Value:
- (iii) Pension
  - a. Service Pension:
    - \* Cut in pension if any;     Yes     No \*
    - If yes: (Reasons)
      - Permanent
      - Temporary (mention the period)
      - S.P. Cut from
      - S.P. Cut upto
  - a. Enhanced Family Pension:
  - b. Normal Family Pension:

**16. Anticipatory/ Provisional pension**

Sanctioned, if any: upload order

(G.O. in case of Gazetted officers for sanction of provisional pension)

**17. Government dues pending:**

Amounts to be recovered Rs.	Reasons	Mode of recovery (from DCRG and relief RG Plus Pension)
<b>Total</b>		

**18. Last Pay Details:** (Auto Populate)**19. Last Pay Certificate:**

1. Designation:
2. Date of Retirement:
3. Pay and Allowances drawn upto:

Pay Drawn Particulars	Amount (Rs)
Basic Pay	
PP/SP/FP	
DA	
HRA	
Addl. HRA	
CCA	
<b>Total</b>	

Deductions Particulars	Amount (Rs)
GIS	
PT	
EHS	
<b>Total</b>	

Increments due, if any, before retirement/next month of retirement which counts for pension.

Particulars	Basic Pay (Rs)	Date
Date of next annual increment		
Date of notional increment, if any		

Note: For pension calculation only.

**SANCTION ORDER/ ADMISSIBILITY REPORT**

Sri/Smt./Kum.----- S/o or D/o -----, -----  
 Department, is retiring from public service after attaining the age of superannuation on ..... Pensionary benefits including commutation found admissible under the rules may be authorized. It is verified from the records in my custody and certifies that no disciplinary or judicial proceedings are pending / contemplated against retiring/ retired government servant to whom I am the authority for sanction of pension.

- i) Service pension : Rs.
- ii) Retiring gratuity : Rs.
- iii) Commutation : Rs. As per eligibility
- iv) Family pension
  - a) Enhanced family pension : Rs.
  - b) Normal family pension : Rs.

a. Pension in case of differently abled/Minor Children if any :  
 (Guardianship certificate in case of Minors/differently abled to be uploaded wherever necessary)

Office Seal

Signature and Designation of  
 Pension Sanctioning Authority Date:

Signatures:

	Designation with EID	Sign	Date	Mobile Number
<b>Employee</b>				
<b>DDO</b>				
<b>Pension Sanctioning Authority</b>				

**FORM 1 – DESCRIPTIVE ROLLS**

Note: (1) See item 5 of Part 2.

(2) To be filled 12 months prior to retirement.

(3) AG/ DAO to tear off and attach to Pension Authorisation sent to Pension Disbursing Authority).

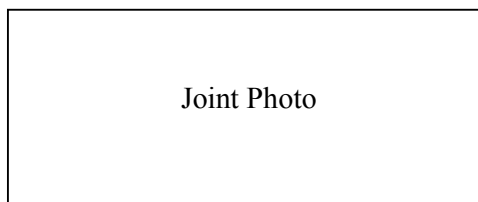
**DESCRIPTIVE ROLLS**

- A. Employee ID No. :
- B. UID No : Auto Populate
- C. PAN No. :
- D. Space for photographs:



Single Photo

Single Photo



Joint Photo

Joint Photo

Serving Pensioner / Family Pensioner  
 Gratauitant / Guardian or Minor or  
 Handicapped child.

Joint Photo of Serving  
 Pensioner with Family Pension  
 beneficiary / Guardian with Minor or Handicapped child.

(Attestation has to be done across the Photos by a Gazetted Officer of AP Government in Service)

E. Specimen signature of :

(i) Service Pensioner:

Specimen signature of \_\_\_\_\_, S/o

- 1.
- 2.
- 3.

ii) Family Pensioner Specimen Signature of- Smt. \_\_\_\_\_, Wife / of

- 1.
- 2.
- 3.

F. Personal identification marks of:

(i) Service Pensioner :

- 1.
- 2.

(ii) Family Pensioner /Gratuitant / Guardian of Minor or handicapped child:

1. A black mole on left index finger
2. A black mole on left upper palm

G. Left hand thumb and finger impressions of service pensioner / family pensioner / gratuitant / guardian of minor handicapped child: (to be given by the illiterate or those unable to sign and for others it is optional)

Details	Thumb finger	Fore finger	Middle finger	Ring finge	Little finger
Service Pensioner					
Family Pensioner/					
Gratuitant /					
Guardian of Minor Handicapped Child					

Place:

Attested by  
Signature

Date:

Name: Designation:

Official Seal:

(Attestation has to be done by a Gazetted Officer of AP State Government in Service)

Note: 3 copies will be forwarded to Accountant General/Local Fund Audit Officer by Pension Sanctioning Authority and one will be retained by the Pension Sanctioning Authority.

**FORM 2 – NOMINATION FOR DCRG AND FAMILY PENSIONS**

Note: (1) See item 5 of Part 2.

(2) AG/ DAO to tear off and attach to Pension Authorisation sent to Pension Disbursing Authority).

**NOMINATION**

(The Government servant may use separate forms, if he wish is to make different nominations for each type of payment mentioned below

I hereby nominate the person/persons mentioned below and confer on him/her/ them the right to receive Life Time Arrears of Pension, Retirement Gratuity that may be sanctioned by Government, in the event of my death while in service and right to receive on my death Life Time Arrears of Pension, Retirement Gratuity, commuted value of pension, Death Relief which having become admissible to me on retirement—which may remain unpaid at my death.

Name and address of Nominee	Relationship with Government Servant	Age	Amount of share payable to each in Col. 1	Contingent on happening of which the nominations shall become invalid (Death need not be mentioned)	Name and address , relationship and age of the alternative nominees(s) to whom the right conferred on the nominees(s) in Col.1 shall pass in the event of nomination to him/ her /them becoming in effective	Amount of share payable to each in Col (6)
1	2	3	4	5	6	7
SMT.	WIFE	Year	100%			

This nomination supersedes the nomination made by me earlier on .....

Signature of Govt. Servant

**DECLARATION BY THE PENSIONER**

1. I agree to give digital/ physical life certificates for getting the pension as prescribed in the rules.
2. I also undertake that, I and my heirs and successors accept the liability of over payment if any made to me under the scheme and the excess amount credited to my SB account may be recovered from the said account.

Signature of Govt. Servant

//ATTESTED//

Witness:

- |                  |                |
|------------------|----------------|
| 1. Signature     | 2. Signature   |
| Name and Address | Name & Address |

Signature of the Govt. Servant

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Name:

Designation:

Office :

Counter signed

Name:

Designation:

Office :

Signature of Head of Office/Department:

Name and Designation

Office Seal:

(BY ORDER AND IN THE NAME OF THE GOVERNOR OF ANDHRA PRADESH)

**MUDDADA RAVICHANDRA**  
PRINCIPAL SECRETARY TO GOVERNMENT (FAC)

To

All the Departments of Secretariat.

All Heads of the Departments.

The Principal Accountant General, AP,  
Hyderabad.

The Commissioner, Printing, Stationary and Stores Purchase, Vijayawada for publication in the Gazette.  
All Service Associations.

Copy to:

All Chief Executive Officers of Zilla Parishads.

The Director of Treasuries and Accounts, A.P, Vijayawada.

The Pay and Accounts Officer, Vijayawada.

The Director of Works and Accounts, Vijayawada

The Director of State Audit, Vijayawada.

The Director of Insurance, Vijayawada.

The CEO, APCFSS, Vijayawada.

SF/SCs

//FORWARDED BY:: ORDER//

SECTION OFFICER