

## OFFICE OF THE CONTROLLER OF EXAMINATIONS

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Sr. No.	Date	Session	Sr. No. of Answer Books			Damage if any (Sr. No. of	Balance Answer	Sign. Of Flying Squad Officials	
			FROM	<u>T0</u>	Total	damage Ans. Book(s)	book(s) with Sr. No.	/Officers with date	Remarks
								1.	
								2.	
								3.	
								4.	
								1.	
								2.	
								3.	
								4.	
								1.	
								2.	
								3.	
								4.	
								1.	
								2.	
								3.	
								4.	

Signature of Centre Supdt.

Sign. of Supdt. in Chief