

Specimen Signatures & Thumb Impressions for Transfer of (01-Kanal) file LDA City Lahore

Name: _____

S/o, W/o, D/o: _____

CNIC No: _____

Address: _____

Signatures:

Thumb Impressions

Pay Order No: _____ Bank _____

Branch _____ in Favour of DG, LDA Lahore.