

Date:

To
The Secretary,
Board of Intermediate Education
Andhra Pradesh, Hyderabad.

Sir,

Sub: Issue of **Migration Certificate / Duplicate Marks Meo /**
1st year / 2nd year – Request – Reg.

NAME OF THE CANDIDATE :

HALL TICKET NO. MONTH & YEAR :

COLLEGE WHERE STUDIED WITH ADDRESS:

CHALLAN AMOUNT & DATE :

PURPOSE :

ADDRESS IN CAPITAL LETTERS :
WITH PIN CODE NUMBER

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Yours faithfully,