

PROFORM FOR ANNUAL RETURNS TO CENTRAL INFORMATION COMMISSION

Name of the Department:
Year for the period from:

Directorate of Social Welfare, Puducherry
01.04.2010 to 31.03.2011

SI.No.	Name of the Public Authority	No. of Request Received	No. of Decision	Decision where applications rejected														No. of cases where disciplinary actions was taken against any Officer in respect of administration of this act	Amount of charges collected	
				No. of items various provisions were involved in 4.b																
				Section 8 (1)										Other Sections						
1	2	3	4a	a	b	c	d	e	f	g	h	i	j	9	11	24	Others	5	6	
1	The Director, Social Welfare Department, Puducherry	48	48	Nil	Nil	Nil	Nil	Nil	Nil	Nil	Nil	Nil	Nil	Nil	Nil	Nil	Nil	Nil	Nil	

Sd/-

SIGNATURE OF THE PUBLIC INFORMATION OFFICER