



**MONSOON
LILY
INTERNATIONAL**

DATE...../...../.....

M.L.INTERNATIONAL
Social Organization

BLOCK AREA MANAGER(BAM) SHEET

NAME M.NO..... ID NO..... BLOCK.....

DISTRICT..... STATE..... PIN.....

SI.No.	NAME	POST	MOBILE NO.	AREA
1.				
2.				
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DISTRICT AREA MANAGER(DAM)

ID NO..... OFFICE CODE NO.....

BLOCK AREA MANAGER(BAM)

STAMP SIGNATURE

SIGNATURE