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| **NAME OF DISTRICT SUKKUR NAME OF TALUKA ROHRI NAME OF DEH KANDHRI** | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| **STATEMNET SHOWING THE POSITION AS PER AVAILABLE RECORD INCLUDING MICROFILMED VF-VII-A PREPARED DURING RE-WRITTEN PROCESS IN 1985-86 AND OWWARDS VIZ-A-VIZ THE COMPUTERIZED RECORD OF RIGHTS** | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| **Position as per available Record in Mukhtiarkar Revenue Office** | | | | | | | | | | | | | | | | **Position of Entry Nos:&**  **Date of Previous Transaction** | | | | | | | **Positionasper Microfilmed VF-VII-A(1985-86) supplied by the Board of Revenue** | | | | | | | | | | | | | | Remarks Reasons Whether It is in Inconformity with VF-VII-A Remarks/Reasons | |
| **S.**  **No** | | **Latest Entry No.** | **Date of entry** | | **Register** | | **Name of owner** | | **Share** | | **Survey No.** | | **Area** | | **Register** | | | **Entry No.** | | **Date of entry** | | **Register** | | **Entry No.** | | **Date of entry** | | | **Name of Owner** | | **Share** | | **Survey .No** | | **Area** | |
| 389 | | 87 | 22-1-99 | | VIIB/2 OLD | | Aflatoon s/o ghuryo khan | |  | | 378 and others | | 0-22 | |  | | |  | |  | | VIIA | | 493 | | 27-2-86 | | | Noor Muhammad s/o raza Muhammad and others | | 100 | | 378 | | 4-35 | | Inconformity | |
|  | |  |  | |  | |  | |  | |  | |  | |  | | |  | |  | | VIIA | | 495 | | 27-2-86 | | | Noor Muhammad s/o raza Muhammad and others | | 100 | | 381 | | 4-32 | |  | |
|  | |  |  | |  | |  | |  | |  | |  | |  | | |  | |  | |  | |  | |  | | |  | |  | |  | |  | |  | |
| 390 | | 86 | 12-1-99 | | VIIB/2 OLD | | Muhammad ismael s/o alisher | |  | | 839 and others | | 38-34 | | D.K  8615 | | | 72 | |  | |  | |  | |  | | |  | |  | |  | |  | | D.K 8615/72 Not Inconformity | |
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SIGNATURE OF MUKHTIARKAR SIGNATURE OF ASSISTANT COMMISSIONER SIGNATURE OF VERIFYING OFFICER OF DIRECTOR/RRO (E&I)

NAME\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ NAME\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ NAME\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_