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| **NAME OF DISTRICT SUKKUR NAME OF TALUKA ROHRI NAME OF DEH KHAHI JAGEER** |
| **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 Transation** | **Position as per 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 enZtry**  | **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** |
| 37 | 8 | 17-10-11 | V11B | Ghulam shabir s/o Muhammad sulleman & others | Share | 263 & others | 16-04 ¼  |  |  |  | V11A | 49 | 30-12-85 | Muhammad sulleman s/o wali Muhammad & others | Whole/o/ | 263 & othrtd | 2370-18 | In conformity |
| 38 | 7 | 9-8-11 | VIIB | Afshan Iram w/o Mehmood Khan Khoso | Share | 263 & others | 45-20 | VIIB | 544017 | 4-8-9110-9-8927-7-87 | VII A | 49 | 30-12-85 | Temoor shah s/o soomar shah | Whole/o/ | 263&others | 2370-18 | In conformity |
| 39 | 6 | 9-8-11 | V11B | Rehab d/o Mehmood khan khoso | share | 263 & others | 45-20 | V11B | 18314411399544017 | 17-5-0720-3-043-4-0023-8-994-8-9110-9-8927-7-87 | V11A | 49 | 30-12-85 | Temoor shsh s/o Soomar shah & others | Whole/o/ | 236 & others | 2370-18 | In conformity |
| 40 | 5 | 9-8-11 | V11B | Areba d/o Mehmood Khan khos  | Share | 263 & others | 45-20 | V11B | 544017 | 4-8-9110-9-8927-7-87 | V11A | 49 | 30-12-85 | Temoor shsh s/o Soomar shah & others | Whole/o/ | 236 & others | 2370-18 | In conformity |
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SIGNATURE OF MUKHTIARKAR SIGNATURE OF ASSISTANT COMMISSIONER SIGNATURE OF VERIFYING OFFICER OF DIRECTOR/RRO (E&I)

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