

# TAMIL NADU PUBLIC SERVICE COMMISSION

## BUNDLE – IA

[ "USED" answer booklets ]  
(GENERAL CANDIDATES)

Name of the examination :

Date :  Session :

Name of the centre :  Centre code :

Name of the Venue :  Venue No :

No. of candidates allotted:  Present :  Absent :

No. of used answer booklets  
kept in this bundle :

Time of packing of this bundle :

**CHIEF INVIGILATOR**

**INSPECTION OFFICER**

Signature with date :

Name in block letters :

Designation :

**(MOFUSSIL CENTRE)**

**HEAD OF MOBILE TEAM**

**TREASURY OFFICIAL**

Time of receipt of this bundle:

Signature with date

:

**(CHENNAI CENTRE)**

**VAN DUTY STAFF**

**RECEIVING OFFICER**

Time of receipt of this bundle:

Signature with date

:

**TAMIL NADU PUBLIC SERVICE COMMISSION**

**BUNDLE – I B**

[ "USED" answer booklets ]  
**(DIFFERENTLY ABLED CANDIDATES)**

Name of the examination :

Date :  Session :

Name of the centre :  Centre code :

Name of the Venue :  Venue No :

No. of candidates allotted:  Present :  Absent :

No. of used answer booklets  
kept in this bundle :

Time of packing of this bundle :

**CHIEF INVIGILATOR**

**INSPECTION OFFICER**

Signature with date :

Name in block letters :

Designation :

**(MOFUSSIL CENTRE)**

**HEAD OF MOBILE TEAM**

**TREASURY OFFICIAL**

Time of receipt of this bundle:

Signature with date

:

**(CHENNAI CENTRE)**

**VAN DUTY STAFF**

**RECEIVING OFFICER**

Time of receipt of this bundle:

Signature with date

:

**TAMIL NADU PUBLIC SERVICE COMMISSION**

**BUNDLE – II**

**[ATTENDANCE SHEET cum HALL SKETCH]**

Name of the examination :

Date :  Session :

Name of the centre :  Centre code :

Name of the Venue :  Venue No :

No. of candidates allotted:  Present :  Absent :

Time of packing of this bundle :

**CHIEF INVIGILATOR**

**INSPECTION OFFICER**

Signature with date :

Name in block letters :

Designation :

# TAMIL NADU PUBLIC SERVICE COMMISSION

## BUNDLE – III ( Reports )

Name of the examination :

Date :  Session :

Name of the centre :  Centre code :

Name of the Venue :  Venue No :

Sl.No.	Name of the record	Tick [ ]

### CHIEF INVIGILATOR

### INSPECTION OFFICER

Signature with date :

Name in block letters :

Designation :

# TAMIL NADU PUBLIC SERVICE COMMISSION

## BUNDLE – IV

### (ADDITIONAL , ABSENTEE and DEFECTIVE QUESTION –CUM- ANSWER BOOKLETS )

Name of the examination :	<input type="text"/>		
Date :	<input type="text"/>	Session :	<input type="text"/>
Name of the centre :	<input type="text"/>	Centre code :	<input type="text"/>
Name of the venue :	<input type="text"/>	Venue No :	<input type="text"/>
[1] No. of additional booklets received :	<input type="text"/>		
[2] No. of additional booklets used :	<input type="text"/>		
[3] Balance [1-2] :	<input type="text"/>		
[4] No. of un-used additional booklets :	<input type="text"/>		
[5] No. of defective booklets :	<input type="text"/>		
[6] No. of booklets of absentee candidates :	<input type="text"/>		
[7] Total [4+5+6] :	<input type="text"/>		
No. of wax seals affixed :	<input type="text"/>	Time of packing of this bundle	<input type="text"/>

### **CERTIFICATE**

I hereby certify that this bundle contains a total of \_\_\_\_\_ question- cum answer booklets (as in Sl.No.7 above).

### **CHIEF INVIGILATOR**

### **INSPECTION OFFICER**

Signature with date :	<input type="text"/>	<input type="text"/>
Name in block letters :	<input type="text"/>	<input type="text"/>
Designation :	<input type="text"/>	<input type="text"/>

# TAMIL NADU PUBLIC SERVICE COMMISSION

## USED COVERS OF QUESTION-CUM-ANSWER BOOKLETS

Name of the examination :

Date :  Session :

Name of the centre :  Centre code :

Name of the Venue :  Venue No :

No. of candidates allotted:  Present :  Absent :

Time of packing of this bundle :

### **CERTIFICATE**

I hereby certify that this bundle contains a total number of \_\_\_\_\_ Used Covers of question- cum answer booklets.

### **CHIEF INVIGILATOR**

### **INSPECTION OFFICER**

Signature with date :

Name in block letters :

Designation :

**TAMIL NADU PUBLIC SERVICE COMMISSION**

**COVER - C**

**[ Memory Card ]**

Name of the examination :

Date :  Session :

Name of the centre :  Centre code :

Name of the venue :  Venue No :

Time of packing of this bundle :

The Memory Card of the video coverage is kept in this bundle

**CHIEF INVIGILATOR**

**INSPECTION OFFICER**

Signature with date :

Name in block letters :

Designation :