

OMR ANSWER SHEET

USE BLACK/BLUE BALL POINT PEN ONLY

ORIGINAL COPY

NAME OF THE CANDIDATE

FATHER'S NAME

PROGRAMME NAME / SUBJECT NAME

L.L.B. (Integrated 5 years)

Roll No.	Q. Booklet No.	Paper Code	Question Booklet Series
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OMR ANSWER SHEET NO.

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Signature of the Candidate

Signature of the Invigilator with Date