

**FORMS FOR GIVING PARTICULARS OF OFFICE AND FIRMS**

[SEE REGULATION –165]

1. Name of the company secretary or firm of company secretary in practice

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2. Name(s) of the proprietor/partners of the firm with membership No.(s)

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3. Date of Commencement of Firm

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4. Address of the head office of the company secretary/firm

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Pin Code: \_\_\_\_\_

5. Address of branch offices of the company secretary/firm, if any \*

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Pin Code: \_\_\_\_\_

6. Date(s) of opening of branch offices

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7. Name of the member in charge of each of the offices i.e. Head office & Branch Office, with membership no.

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8. Whether any of the members mentioned in column 7 above are in charge of any other office of company secretary of a firm of such company secretaries and whether any of them is engaged in full time or part time occupation elsewhere. If so, full particulars should be given.

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9. Name(s) of the Member(s) of the Institute with membership No.(s) who is/are working as paid assistant(s) in the firm/under the company secretary in practice and date of joining of each member.

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Place:

Signature

Of the company Secretary/partners  
Of the firm with Membership No.

Date:

**N.B.** This form must be signed by all partners. Until this is done the existence of particulars of Change relating there to will not be recognised. An attested copy of the partnership deed should be sent with this form duly authenticated by partner(s) of the firm.

\* Strike off whichever is not applicable