

**ANNEXURE-V**

**[BUNDLE-1]**

[Note: This Format is used only for Bundle-1]

DETAILS TO BE MENTIONED AND PASTED ON THE OUTER SEALED CLOTH COVER

Name of the Examination : Date : Session: FN/AN.

Name of the Centre: Venue No:

NO. of Candidates Allotted: Present: Absent:

No. of used Answer Sheets kept in the Bundle:

No. of Wax Seals affixed :

I was personally present during counting and packing of used OMR Answer sheets and while affixing Barcode Sticker on the packet. The Bundle contains \_\_\_\_\_ number of used OMR Answer sheets

**To  
Thiru./Tmt.  
CONTROLLER OF EXAMINATIONS  
TAMIL NADU PUBLIC SERVICE  
COMMISSION  
FRAZER BRIDGE ROAD, VOC NAGAR,  
PARK TOWN, CHENNAI-600 003.**

Signature of the TNPSC staff/  
Inspection staff deputed by District Collector:  
(with Name and Designation)

Signature of the Chief Invigilator:  
(with Designation seal)