

STATEMENT SHOWING THE STATUS OF THE CASE ALLOTTED TO THE LEGAL AID COUNSEL BY THE HIGH COURT OF MEGHALAYA/STATE LEGAL SERVICES AUTHORITY/DISTRICT LEGAL SERVICES AUTHORITY/DISTRICT COUNCIL COURTS AND ITS SUBORDINATE COURTS FOR THE MONTH OF _____, 20

Name of Legal Aid Counsel :

District :

Sl.No.	Name of UTP's and applicant	Name of parties	Case reference	Reference of the Appointment letter	Status of the case	Signature of the legal Aid Counsel

Copy forwarded to;

1. The Registrar General, High Court of Meghalaya, Shillong
2. The Member Secretary, MSLSA, Shillong
3. The Secretary, District Legal Services Authority _____

Countersignature of the Magistrate

NB : This is compulsory for every Legal Aid Counsel to provide this monthly status report to the above mentioned persons.

