



FORM "L"
SINDH BAR COUNCIL
ADVOCATE'S DATA COLLECTION FORM

SINDH HIGH COURT BUILDING (ANNEXE) KARACHI
Phone : 99203187, 99205893
Fax : 99205892
E-mail : admin@sindhbarcouncil.org
Web Site : www.sindhbarcouncil.org

(Applicable for all practicing Advocates of High Court in Sindh)
(TO BE FILLED WITH BLOCK LETTERS)

See Rule 59 (i)

Two Recent
Photograph 1-
1/2 x 1-1/2
size in Court
Dress

* Please read instructions overleaf before filling the form

1. Advocate's Name _____
(As per Licence of Sindh Bar Council) (BLOCK LETTER)
2. S/o, D/o. W/o.: _____
3. Date of Birth : _____ 4. Blood Group _____
(As per Matriculation Certificate)
4. CNIC No.

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5. Address for ID CARD: _____

6. E-mail: _____ Cell # _____
7. Temporary Address: _____
_____ Phone # _____
8. Date of Enrolment (As an Advocate) _____
9. Date of Enrolment (As an Advocate of High Court): _____
10. Registration / Ledger No. Sindh Bar Council: _____
11. Specify Member Ship of the District Bar Association: _____
12. Specify Member Ship of the High Court Bar Association (if any) _____

Date: _____

(Signature of Advocate)

ATTESTED BY

MEMBER
SINDH BAR COUNCIL

OR

PRESIDENT
CONCERNED BAR ASSOCIATION

Note:

1. 2 Photographs in Court Dress.
2. Attach C.N.I.C Copy (Nadra Identity Card).
3. Challan Copy in Identity Card Fund of Rs. 500/-