

**CODING SHEET**  
**IN THE HIGH COURT OF ORISSA: CUTTACK**  
**CHAPTER-VI, RULE - 28**  
**REVIEW PETITION ARISING OUT OF WRIT PETITION**  
**(To be filled by the Registry)**

Case Type \_\_\_\_\_ No. \_\_\_\_\_ of \_\_\_\_\_ Date of Registration \_\_\_\_\_

D. No. \_\_\_\_\_ Date of Presentation \_\_\_\_\_

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**(To be filled by the Counsel for Petitioner in black ink)**

**Case Type** \_\_\_\_\_

**Petitioner (s)** \_\_\_\_\_

**Home District** \_\_\_\_\_ **Sex (M /F)** \_\_\_\_\_ **Age** \_\_\_\_\_

**O.P.(s)** \_\_\_\_\_

**Counsel for Petitioner**  
with State Bar Council Enrolment No., E.Mail Id / Phone No./ Mobile No. if any \_\_\_\_\_  
\_\_\_\_\_

**Counsel for Opposite Party**  
with State Bar Council Enrolment No., E.Mail Id / Phone No. / Mobile No. if any \_\_\_\_\_  
\_\_\_\_\_

**Subject matter / Act** \_\_\_\_\_

**Order sought to be reviewed**

Case Type \_\_\_\_\_ No \_\_\_\_\_ Year \_\_\_\_\_

Date of Judgment \_\_\_\_\_ passed by \_\_\_\_\_

**Passing Officer**

**Signature and full name of  
the Party / Advocate for**  
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**(To be filled by the Court Master / P.A. concerned in Court itself in Red ink)**

**Nature of Disposal** \_\_\_\_\_ **By** \_\_\_\_\_

**Date of Disposal** \_\_\_\_\_

**Court Master / P.A.**