

Complaint Detail of Complaint ID

COMPLAINANT'S INFORMATION

| | |
|---------------|---|
| Name | Ravneet Kaur |
| Relation Name | S/O ggg |
| Date of Birth | 2012-02-16 |
| Nationality | Indian |
| Aadhaar No | |
| Mobile No | 9914194836 |
| Email. | ravneetk267@gmail.com |
| Address | H. No., St. No.ssssss, GIANCAHAND NAGAR, PS Daba Ludhiana City, LUDHIANA CITY, PUNJAB |

COMPLAINT DETAIL

| | |
|---------------------------|---------------------|
| Complaint Description | ssssssssss |
| Complaint Type | Gambling:::Arms Act |
| Complaint Category | Gambling:::Arms Act |
| Occurrence Place | sssssss |
| Remarks | |
| Is date of Incident Known | No |
| Date of incident (From) | |
| Date of incident (To) | |