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**Form IV**

1. **Place of Publication**
   
   Institute of Indian Geographers
   Department of Geography,
   University of Pune, Pune 411 007.

2. **Periodicity of its Publication**
   
   Half yearly

3. **Printer’s Name**
   
   S.R. Jog
   YES

4. **Publisher’s Name**
   
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   University of Pune, Pune 411 007.
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   S.R. Jog
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6. **Name and addresses of individuals who own the newspaper and partners of share holders holding more than one percent of the total capital**
   
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Signature of the Publisher

Dt. July, 2015

Printed at Mudra, 383 Narayan Peth, Pune 411030  * Tel.: 24456836, 24452014