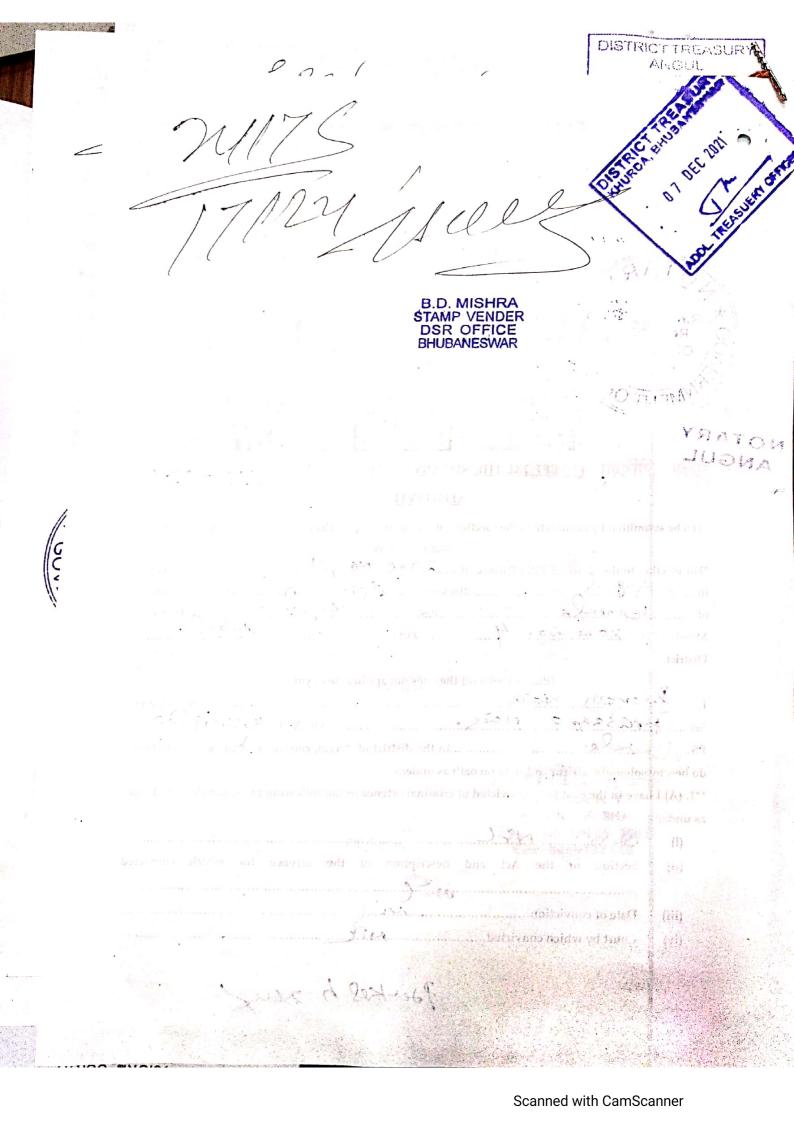


AFFIDAVIT

(To be submitted by candidate to the Election Officer/Returning Officer as an accompaniment to the
Nomination Paper)
*For election to the office of Zilla Parisad of
Block of
Deather A P.S. of Angus District
70 me out 4 Zilla Parisad of Angel
*For election to the office of Zilla Parisad of
District.
(Please strike off the ones not applicable to you)
I lonax out mark son/daughter / wire or
(Please strike off the ones not applicable to you) I son/daughter / wife of Sri Pasana a Nark Of Vill kale Pado Sri basana a Nark Of Vill kale Pado
Sri
I relevantly affirm and state on oath as under:
**1. (A) I have in the past been convicted of criminal offence in the following cases and the details are
(i) Case No
(i) Case No
(ii) Section of the Act and description of the offence for which
(ii) Section of the Act and Company
5 D to of conviction
And Lynning and And Lynning an
(iv) Court by which convicted
Prokes h ray





ANGUER 3	Punishment imposed (indicate period of imprisonment awarded and/or quantum of the
Alto	fine imposed
(vi)	Details of appeal/revision-etc., against conviction
	N. C.
	(Repeat the above sequence in respect of each separate case of conviction)
(B)	That I have in the past been discharged/acquitted in the following case(s):-
(i)	Section of the Act and description of the offence with which charged The Court which had taken cognizance:
(ii)	
(iii)	Case No
(iv)	Details of appeal/application for revision etc, if any, filed against above order taking cognizance:
• 1	(Repeat the above sequence in respect of each separate case of discharge/ acquittal)
(C)	The following case(s) is/ are pending against me in which cognizance had been taken by
(i)	Section of the Act and description of the offence for which cognizance taken:
(ii)	The Court which has taken cognizance
(iii)	Case No
(iv)	Details of appeal/application for revision etc., if any, filed against above order taking
	Cognizance:
	(Repeat the above sequence in respect of each separate case of cognizance by Court)

If information against any of the columns at (A)/(B)/(C) is nil, state NIL against the corresponding column and strike off the sub-columns below.

Pserkesh our K

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That Lang pouse my dependants*** own the following immovable properties: OAA 044492

Agricultural Land(s)	Location	Area	Approx, present marke value according to me.
Self Name		A. T	
Spouse (Give Name)	,	AR 13	
Dependant Son(s) (Give name(s))	4 1 1		
Dependant daughter(s) (Give name(s))		A	
Dependant (others) (Give name & relationship)	Bragaban Hook Bragaban Hook Monza. Kaleigeda	Kyaja - 5-8 Arra - 43,13 dein	Re-a Lakbo
In joint name(s) (Give Names)			1 . 2 =

pseikagh rouk

relmon elle



-4-Approx, present market ODISHA Location ANG Urban Land(s) Area value according to me. Self Name Nil M& (Spouse (Given Name) Dependant Son(s) (Give name(s)) Dependant daughter(s) 495 (Give name(s)) Dependant (others) (Give name & relationship) In joint name(s) (Give Names)

Psertally north

megrow eggese AHO



nyspouse/my dependants*** own the following movable property: Silver Approx. gold Approx. Gold & Approx. Motor present silver present ornaments: other vehicle present market ornaments market precious stone(s) market with value value (In description value in · according tolas/grams according tolas/gram/carat) according such as Car, to me to me Jeep, Truck, to me Bus NEX Self Name Spouse (Give Name) Dependant Son(s) (Give name(s)) Dependant daughter(s) (Give name(s)) Dependant (others) (Give name relationship) joint name(s) (Give Names)

preses, h ronx



3. (B) That, I/my spouse/ my dependants *** have the following Bank balance/ deposits:-

	Name of the Bank	Amount of fixed deposit	Name of the Bank/ Post Office	Savings Account	Name of the Company & No. of shares held	of shares
Self Name	Bras Groy	* Q	- No.	110 28 03961000	new	#1
Spouse (Give Name)	NEW	· ·	10.	N=Q	aci	N
Dependant Son(s) (Give name(s))	NG Q	r=X) M-:2	MUS	ASS	Na-i-C
Dependant daughter(s) (Give name(s))	Nil	14.	n. l	M-	nol	work!
Dependant (others) (Give name&	N-Q	~4.	n.Q	N-C	Al-s	
relationship) In joint name(s) (Give Names)		A-S	• al	us Q	45,2	•••

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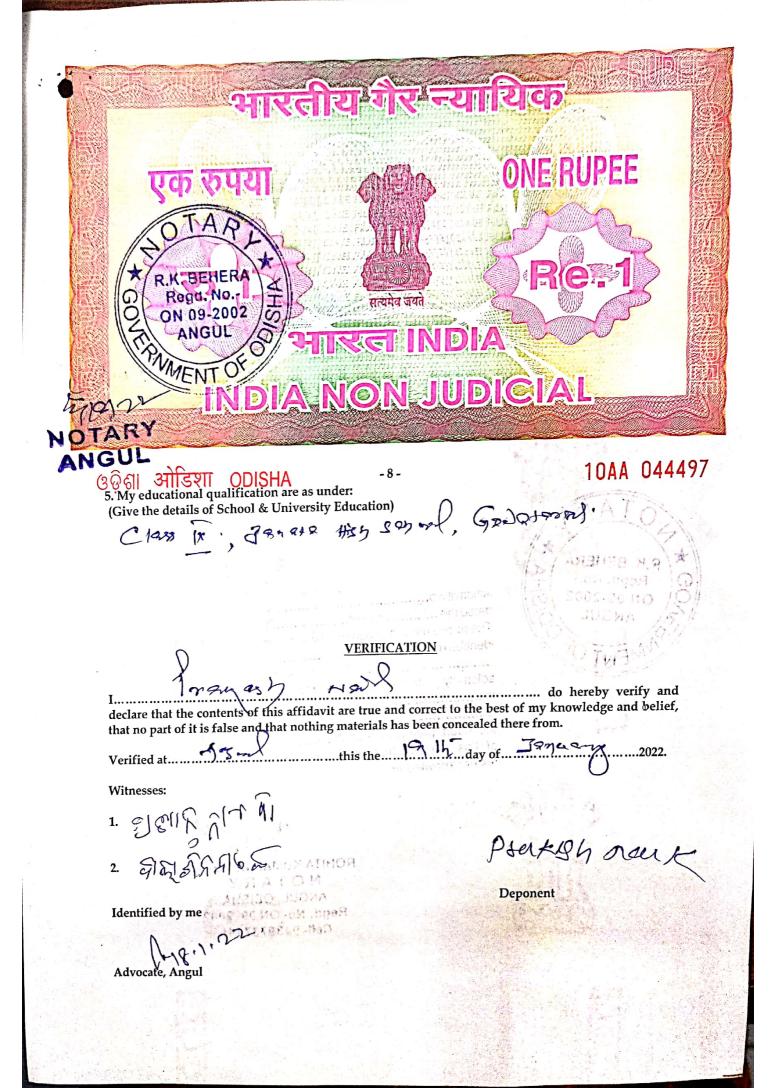
ANGUE ODISHA
4. That, I/my spouse/ my dependants ***are liable to pay the following dues to public financial

institutions and Government dues (Give Details) Any Other **Financial** Dues **Income Tax Dues** Government dues Dues. Institutions Details of Amount the nature of demand/ dues Self Name M = (Give Spouse Name) 14. Dependant Son(s) MS (Give name(s)) M-Dependant Nice daughter(s) (Give name(s)) Dependant (others) name& (Give relationship) In joint name(s) (Give Names)

from KOZ DUNK

^{***} Dependant' means a person wholly dependent on the income of the candidate.

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PSUKShrank

ROHITA KUMAR BEHERA

N O T A R Y

ANGUL, ODISHA

Regd. No- ON 09- 2002

Ceft- 9439737146

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