

FORMAT OF AF

(To be submitted by candidate to the Election Officer / Returning Officer as an accompaniment to the Nomination Paper)

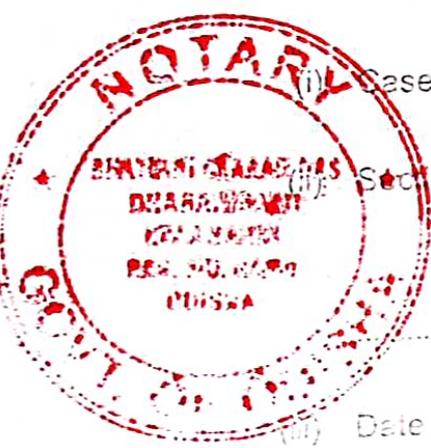


*For election to the office of 7.8 Sarpanch of Randigaon G.P. in Kalampur Block of Kalabahal District / Member of Kalabahal P. S. of Kalabahal District / Member of Zone - 2 Zilla Parishad of Kalabahal District / Corporator of Areekh Municipal Corporation of District / Councillor of Municipality / NAC of District.

*(Please strike off the ones not applicable to you)

I Areekh Naik, son / daughter / wife of Paramasunare, candidate at the above election, do hereby solemnly affirm and state on oath as under :-

**1. (A) I have in the past been convicted of criminal offence in the following case (s) and the details are as under :-



(i) Case No. Nil
(ii) Section of the Act and description of the offence for which convicted. Nil
(iii) Date of Conviction Nil
(iv) Court by which convicted. Nil

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(v) Punishment imposed (indicate period of imprisonment awarded and quantum of the fine imposed)

The following taken

..... Nil

..... Nil

(vi) Details of appeal /revision etc. against conviction

..... Nil

..... Nil

(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.

..... Nil

..... Nil

(ii) The Court which had taken cognizance :

..... Nil

(iii) Case No. Nil

(iv) Details of appeal / application for revision etc., if any, filed against above order taking cognizance :

..... Nil

..... Nil

..... Nil

(Repeat the above sequence in respect of each separate case of discharge / acquittal)



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d and
y)

The following case (s) is / are pending against me in which cognizance has been taken by the court :

(i) Section of the Act and description of the offence for which cognizance taken :

..... Nil

..... Nil

..... Nil

..... Nil

(ii) The Court which has taken cognizance :

..... Nil

(iii) Case No. : Nil

(iv) Details of appeal / application for revision etc., if any, filed against above order taking cognizance :

..... Nil

..... Nil

..... Nil



(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.

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2. That, I / my spouse / my dependants*** own the following immovable properties that, I / my sp

(A)

Agricultural Land(s)	Location	Area	Approx. present Market Value according to you
Self name	✓	✓	✓
Spouse (Give name)	✓	✓	✓
Dependant son(s) [Give name(s)]	✓	✓	✓
Dependant daughter(s) [Give name(s)]	✓	✓	✓
Dependant (others) (Give name and relationship)	✓	✓	✓
In Joint name(s) (Give names)	✓	✓	✓

Urban Land(s)	Location	Area	Approx. present Market Value according to you
Self name	✓	✓	✓
Spouse (Give name)	✓	✓	✓
Dependant son(s) [Give name(s)]	✓	✓	✓
Dependant daughter(s) [Give name(s)]	✓	✓	✓
Dependant (others) (Give name and relationship)	✓	✓	✓
In Joint name(s) (Give names)	✓	✓	✓

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Properties: (that, I / my spouse / my dependants*** own the following movable property :

	Motor vehicle with description such as Car, Jeep, Truck, Bus	Approx. present market value according to you	Gold & gold ornaments; other precious stone(s) (in tolas/gram/ carat)	Approx. present market value according to you	Silver & silver ornaments (In tolas/ grams)	Approx. present market value according to you
Self name	NIL	NIL	NIL	NIL	NIL	NIL
Spouse (Give name)	Byke. "	20000 "	"	"	"	"
Dependant son(s) [Give name(s)]	"	NIL	NIL	"	"	"
Dependant daughter(s) [Give name(s)]	"	"	"	"	"	"
Dependant (others) [Give name (s)]	"	"	"	"	"	"
In Joint name(s) (Give names)	"	"	"	"	"	"



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

	Name of the Bank	Amount in Fixed deposit	Name of the Bank/Post Office	Amount in Current/ Savings Account	Name of the Company & No. of shares held	Face value of shares
Self name	SBI Kachampuzha	52,000	✓	✓	✓	✓
Spouse (Give name)	✓	✓	✓	✓	✓	✓
Dependant son(s) [Give name(s)]	✓	✓	✓	✓	✓	✓
Dependant daughter(s) [Give name(s)]	✓	✓	✓	✓	✓	✓
Dependant (others) (Give name and relationship)	✓	✓	✓	✓	✓	✓
In Joint name(s) (Give names)	✓	✓	✓	✓	✓	✓



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I / my spouse / my dependants*** are liable to pay the following dues to public, financial institutions and Government dues (Give details).

	Government Dues		Income Tax Dues	Dues to Financial Institutions	Any other Dues
	Details of the nature of demand/dues	Amount			
Self name	Nil		Nil	Nil	Nil
Spouse (Give name)	Nil		Nil	Nil	Nil
Dependant son(s) [Give name(s)]					
Dependant daughter(s) [Give name(s)]					
Dependant (others) [Give name (s)]					
In Joint name(s) (Give names)					

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



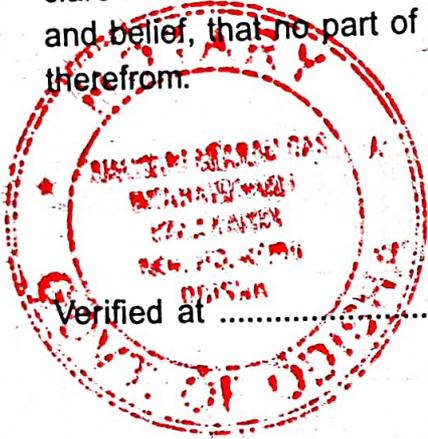
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5. My educational qualification are as under :
(Give the details of School & University Education)

A2 Pass Th. Rampur MMS MAHAR

I, Anah Nask....., do hereby verify and declare that the contents of this affidavit are true and correct to the best of my knowledge and belief, that no part of it is false and that nothing materials has been concealed therefrom.



Verified at this, the 21st day of January 2022

x Anah Nask
Deponent

Witnesses :

1. x कुआहाप पात्र, पिता- सुदर पात्र श्री. गोर्गेश, गो. अशुर्गा
या- जसुवार्णा श्री. कतादाबु.
2. x कुआहाप पात्र श्री. देवसुर नाटक, श्री. गोर्गेश, गो. अशुर्गा
या- जसुवार्णा श्री. कतादाबु.

Handwritten signature and date: 21-1-2022

Subj. Anah Nask, Parents Suneri
Vill. Kotem Dist. Katohandi
Dist. Katohandi came before me
and solemnly affirm
on oath and states that the contents
of the affidavit are true to the best of
his/her knowledge.

Signature of District Magistrate
DISTRICT MAGISTRATE
Katohandi
Regd. No. 5/2000

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