

**FORMAT OF AFFIDAVIT**

to be filled by candidate to the Election Officer / Returning Officer as an accompaniment to the Nomination Paper)

\*For election to the office of Sarpanch of ..... G.P. in  
..... Block of ..... District / Member of  
..... P. S. of ..... District / Member of  
ZONE No- 33 Zilla Parishad of Ganjam District / Corporator of  
..... Municipal Corporation of ..... District / Councillor of  
..... Municipality / NAC of ..... District.

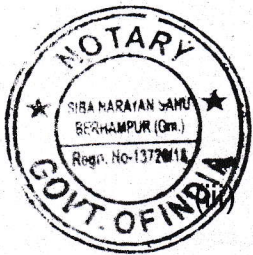
**\*(Please strike off the ones not applicable to you)**

I Gouri Nayak ..... son / daughter / wife of  
Haris Nayak ..... 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 :- NIL

(i) Case No. N.A

(ii) Section of the Act and description of the offence for which convicted. N.A



.....  
Date of Conviction N.A

(iv) Court by which convicted.....  
Some Part of the Affidavit

[Signature]  
NOTARY 24/07/22

[Signature]

[Signature]

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

.....  
.....  
.....

N.A

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

.....  
.....  
.....

N.A

( 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.

.....  
.....  
.....

N.A

(ii) The Court which had taken cognizance :

.....

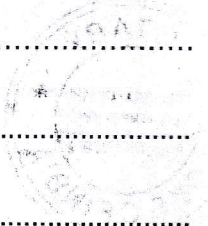
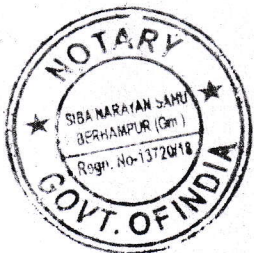
N.A

(iii) Case No. ....

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

.....  
.....  
.....  
.....

N.A



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

acquittal)

NOTARY 21/01/22

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awarded at

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

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

.....  
.....  
.....  
.....  
.....  
.....

*N.A.*

(ii) The Court which has taken cognizance :

.....

(iii) Case No. :

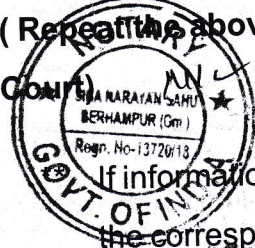
*N.A.*

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

.....  
.....  
.....  
.....

*N.A.*

(Repeat the above sequence in respect of each separate case of cognizance by



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.

Office Part of the Affidavit

*[Signature]*  
NOTARY

*[Signature]*

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

(A)

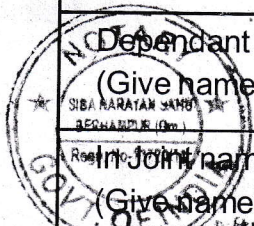
Agricultural Land(s)	Location	Area	Approx. present Market Value according to you
Self name <i>Giri Nayak</i>	<i>N.A.</i>	<i>N.A.</i>	<i>N.A.</i>
Spouse <i>Kantuni Nayak</i> (Give name)	<i>N.A.</i>	<i>N.A.</i>	<i>N.A.</i>
Dependant son(s) [Give name(s)]			
Dependant daughter(s) [Give name(s)]	<i>N.A.</i>		
Dependant (others) (Give name and relationship)			
In Joint name(s) (Give names)			

Self name  
*Giri N*  
Spouse  
(Give name)  
Dependant son  
[G  
n

(B)

*N.A.*

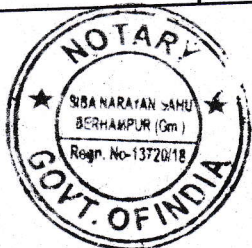
Urban Land(s)	Location	Area	Approx. present Market Value according to you
Self name			
Spouse (Give name)			
Dependant son(s) [Give name(s)]			
Dependant daughter(s) [Give name(s)]			
Dependant (others) (Give name and relationship)			
In Joint name(s) (Give names)			



Notary Public of the Affidavit  
*[Signature]*  
 NOTARY

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 Miri NAYAK	NIL	NIL	-	-	-	-
Spouse (Give name) Kasturi NAYAK	N.A.	N.A.	10 gm	RS 50,000/-	200 gm	RS 1000/-
Dependant son(s) [Give name(s)]						
Dependant daughter(s) [Give name(s)]						
Dependant (others) [Give name (s)]						
In Joint name(s) (Give names)						



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Signature Part of the Affidavit

*[Signature]*  
NOTARY

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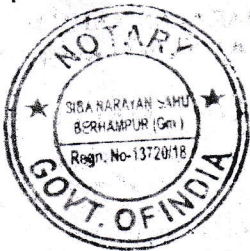


posit, I / my spouse / my dependants\*\*\* are liable to pay the following dues to public, financial institutions and Government dues (Give details).

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

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



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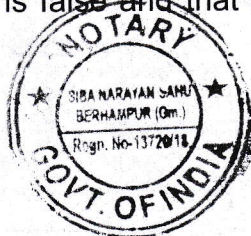
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*[Signature]*  
NOTARY

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

I, Sri Gira Nayaak, 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 Berhampur this, the 21st day of Jan 2022

[Signature]  
Deponent

Witnesses :

- S. K. Boradhan
- C. Hara Prasad

Witnessed by  
[Signature]  
21/01/2022  
ADVOCATE

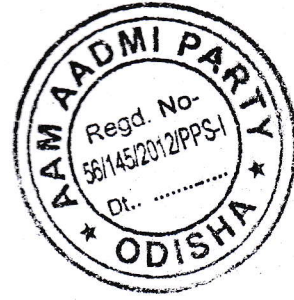
**DECLARATION**

The declarant having been identified by Mr. Boradhan Advocate of Berhampur solemnly affirmed before me on on this the 21st day of Jan 2022 at 9:30 AM/PM. Contents having been read over and explained to the declarants who have perfectly understood the contents there and the theme of making this affidavit

[Signature]  
SIBA NARAYAN SAHU, M.A., LL.B.  
NOTARY BERHAMPUR (GM)

SIBA NARAYAN SAHU, M.A., LL.B.  
NOTARY, BERHAMPUR (GM)  
SI. No. 19 Date 21/01/22  
Time 9:30 PM Place BERHAMPUR

FORM No. 18  
[See Rule 14 (4)]



To  
The Election Officer  
In respect of 33 PATRAPUR-2  
Zilla Parishad Constituency, GANJAM

Sir,

Having been authorised by the President/General Secretary of the State Level/  
National Political Party, namely Aam Aadmi Party Party, I hereby give  
notice that the following person(s) has/have been sponsored by Aam Aadmi Party  
party as its candidate(s) at the ensuing Zilla Parishad Election and  
that BROOM (JHADU) Symbol be allotted to him/her.

Sl. No.	Name of the Zilla Parishad Constituency	Name of the candidate sponsored	Father's/Husband's name of the candidate	Address of the candidate
1	2	3	4	5
1.	33 PATRAPUR-2	GIRI	HARIA	DABADI,
2.		NAYAK	NAYAK	SAMANTARAPUR
3.				GANJAM
4.				
5.				

State Secretary  
Aam Aadmi Party, Odisha

Yours faithfully,  
Soumya Ranjan Swain  
(Name and signature of the person  
who has been authorised by the  
State Level/National Political  
Parties to sponsor candidates)

NOTE : This must be delivered to the Election Officer on or before the date and time fixed for  
scrutiny of nomination papers.

Form No.17

(See Rule 7)

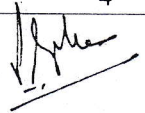
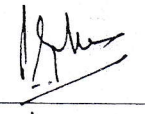

To

The Secretary to the State Election Commission, Orissa, Bhubaneswar-7

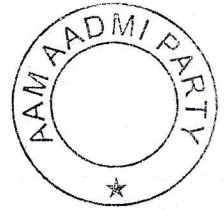
Sub: Zilla Parishad Election - Authorisation of persons to sponsor names of the Party's candidates for allotment of symbols etc.

Sir,

In pursuance of sub-rule (3) of Rule 7 of the Orissa Zilla Parishad Election Rules, 1994, I do hereby authorise the following persons to sponsor candidates for the ensuing Zilla Parishad Elections and endorse his/her/their specimen signatures duly attested by me against each.

	Name of the persons (s) authorised to sponsor candidates on behalf	Zilla Parishad in respect of which he has been authorised	Specimen signature of the person authorised	Attested of the signature by the President/General Secretary
	1	2	3	4
1	Nishikanta Mohapatra State Convenor	All Zilla Parishad	Nishikanta Mohapatra	
2	Soumya Ranjan Swain General Secretary	All Zilla Parishad	Soumya Ranjan Swain	
3	Chandra Bhanu Mantri Office Secretary	All Zilla Parishad	Chandrabhanu Mantri	

Yours faithfully,



President/General Secretary of the

State Level/National Political Party

Name of the Party **AAM AADMI PARTY**

(Seal of the party)

Note-To be submitted in quadruplicate to the State Election Commission

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