

SL-No - 3

Date - 21.01.22

Time - ୧୨.୨୦

ପାରମ ସଂଖ୍ୟା-4

[ନିୟମ 12 (10) ଦ୍ରଷ୍ଟବ୍ୟ]

ମନୋନୟନ ପତ୍ର

..... ଶ୍ରୀ ଶ୍ରୀ ମ ଜିଲ୍ଲାର ଜିଲ୍ଲା ପରିଷଦ ନିମନ୍ତେ ନିର୍ବାଚନ ।

ମୁଁ ଜିଲ୍ଲା ପରିଷଦ ନିର୍ବାଚନ ନିମନ୍ତେ ଶ୍ରୀ ଶ୍ରୀ ମ ଜିଲ୍ଲା ପରିଷଦ ତାଲିକାରେ - ଖୁସ୍‌ସା - 1 ପରିଷଦ ନିର୍ବାଚନ ମଣ୍ଡଳରୁ ନିମ୍ନଲିଖିତ

ଶ୍ରୀ ଶ୍ରୀ ମ

ବ୍ୟକ୍ତିକୁ ପ୍ରାର୍ଥୀ ଭାବରେ ମନୋନୀତ କରୁଅଛି ।

ପ୍ରାର୍ଥୀଙ୍କ ନାମ ସମିତା ସ୍ୱାଇଁ

ପିତା/ପତିଙ୍କ ନାମ ଡକ୍ଟର ନି ସ୍ୱାଇଁ

ତାଙ୍କର ଡାକ ଠିକଣା ଶ୍ରୀମତୀ/ପୋଷ୍ଟ - ଆରମ୍ଭ୍ୟପୁର ଗ୍ରାମପଞ୍ଚାୟତ, କୁଶୁରା ଛାନ୍ଦ, ଜିଲ୍ଲା ପରିଷଦ ନିର୍ବାଚନ ମଣ୍ଡଳ - ୧

..... ଖୁସ୍‌ସା - ୧ ପରିଷଦ ନିର୍ବାଚନ ମଣ୍ଡଳୀର ଭୋଟର ତାଲିକାରେ ତାଙ୍କ ନାମ ଦରଜ ହୋଇଥିବା

କ୍ରମିକ ସଂଖ୍ୟା M.S.S ଡିଭିଜନ - ୮ ଆରମ୍ଭ୍ୟପୁର ଗ୍ରାମପଞ୍ଚାୟତ, କୁଶୁରା ଛାନ୍ଦ, ଜିଲ୍ଲା ପରିଷଦ ନିର୍ବାଚନ ମଣ୍ଡଳ - ୧

ମୋର ନାମ ପ୍ରଭାକର ନି ସ୍ୱାଇଁ ଅଟେ ଏବଂ ଆରମ୍ଭ୍ୟପୁର ଗ୍ରାମପଞ୍ଚାୟତ, ଖୁସ୍‌ସା - ୧

ପରିଷଦ ନିର୍ବାଚନ ମଣ୍ଡଳୀର ଭୋଟର ତାଲିକାର କ୍ରମିକ ସଂଖ୍ୟା M.S.S ଡିଭିଜନ - ୮ ରେ ତାହା

ଦରଜ କରାହୋଇଅଛି ।

ତାରିଖ ୨୧-୦୧-୨୦୨୨

✓ Prabhakar Swain
ପ୍ରସ୍ତାବକଙ୍କ ସ୍ୱାକ୍ଷର

ମୋର ନାମ ଡକ୍ଟର ନି ସ୍ୱାଇଁ ଅଟେ ଏବଂ ଆରମ୍ଭ୍ୟପୁର ଗ୍ରାମପଞ୍ଚାୟତ, ଜିଲ୍ଲା ପରିଷଦ ନିର୍ବାଚନ ମଣ୍ଡଳ - ୧

ପରିଷଦ ନିର୍ବାଚନ ମଣ୍ଡଳୀର ଭୋଟର ତାଲିକାର କ୍ରମିକ ସଂଖ୍ୟା M.S.M ଡିଭିଜନ - ୮ ରେ ତାହା ଦରଜ ହୋଇଅଛି ।

ତାରିଖ ୨୧-୦୧-୨୦୨୨

✓ Tukaram Swain
ସମର୍ଥକଙ୍କ ସ୍ୱାକ୍ଷର

ମୁଁ ଉପର ମନୋନୀତ ପ୍ରାର୍ଥୀ ମନୋନୟନ ପ୍ରତି ସମ୍ମତ କରୁଅଛି ଏବଂ ଏତଦ୍ୱାରା ଘୋଷଣା କରୁଅଛି ଯେ-

(କ) ମୋର ବୟସ ୩୭ ବର୍ଷ ସଂପୂର୍ଣ୍ଣ ହୋଇଅଛି ।

* (ଖ) ମୁଁ ଡକ୍ଟର ନି ସ୍ୱାଇଁ ଦଳଦ୍ୱାରା ଏହି ନିର୍ବାଚନରେ ଛିଡା ହୋଇଅଛି ।

(ଗ) ପସନ୍ଦ ହେଉଥିବା ସଂକେତ, ପସନ୍ଦ କ୍ରମରେ (i) ଶ୍ରୀ ଶ୍ରୀ ମ

(ii) ଏବଂ (iii)

(ଘ) ମୋର ଏବଂ ମୋର ପିତା/ପତିଙ୍କର ନାମ ଉପରେ
..... (ଭାଷାର ନାମ) ଠିକ୍ ଭାବରେ ବନାନ କରାଯାଇଛି ।

(ଙ) ମୋର ଜ୍ଞାନ ଓ ବିଶ୍ୱାସ ଅନୁଯାୟୀ ମୁଁ ପ୍ରାର୍ଥୀ ହେବା ପାଇଁ ଯୋଗ୍ୟ ଏବଂ ଯଦି ମୋତେ
..... ଉପରେ ବିଶ୍ୱାସ କରୁଛି ତେବେ ମୁଁ
ଅଯୋଗ୍ୟ ନୁହେଁ ।

ପୁନଶ୍ଚ ମୁଁ ଘୋଷଣା କରୁଅଛି ଯେ ମୁଁ
.....

**ଜାତି/ଜନଜାତିର ସଦସ୍ୟ ଯାହାକି ଓଡ଼ିଶା ରାଜ୍ୟର ଅନୁସୂଚିତ ଜାତି/ଅନୁସୂଚିତ ଜନଜାତି/ପଛୁଆବର୍ଗ ନାଗରିକ
ଅଟେ ।

ତାରିଖ ୨୧.୦୧.୨୨
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- * ପ୍ରଯୋଜ୍ୟ ହେଉନଥିବା ପାରାକୁ କାଟି ଦିଅନ୍ତୁ ।
- ** ପ୍ରଯୋଜ୍ୟ ହେଉନଥିବା ଶବ୍ଦକୁ କାଟି ଦିଅନ୍ତୁ ।

(ନିର୍ବାଚନ ଅଧିକାରୀଙ୍କଦ୍ୱାରା ପୂରଣ ଲାଗି)

ମନୋନୟନ ପତ୍ର କ୍ରମିକ ସଂଖ୍ୟା
ଏହି ମନୋନୟନ ପତ୍ର ମୋତେ ମୋର କାର୍ଯ୍ୟାଳୟରେ
ତାରିଖରେ ସମୟରେ ପ୍ରାର୍ଥୀ/ପ୍ରସ୍ତାବକଙ୍କ ଦ୍ୱାରା ଦିଆଗଲା ।

ତାରିଖ ୨୧.୦୧.୨୨
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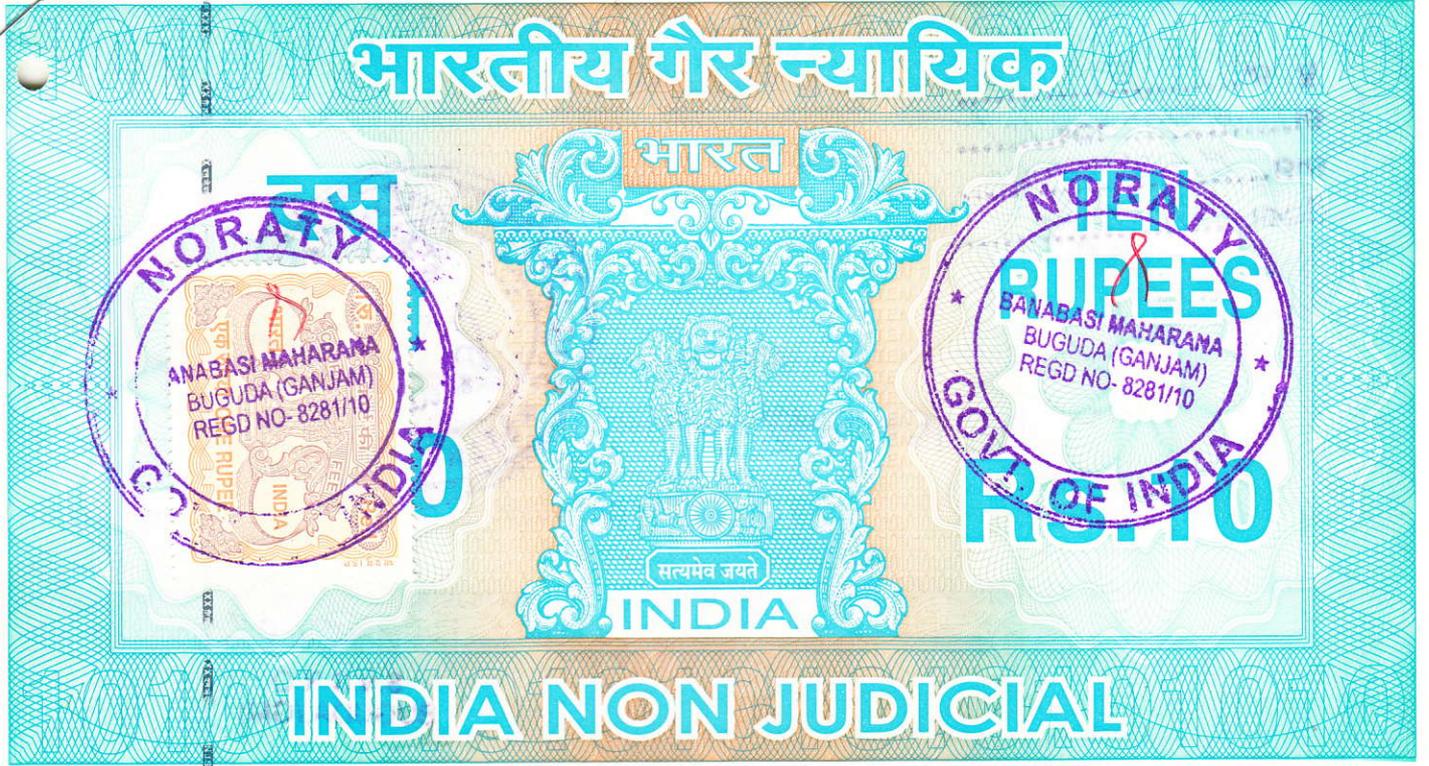
ନିର୍ବାଚନ ଅଧିକାରୀଙ୍କର ମନୋନୟନ ପତ୍ର ମଞ୍ଜୁର କରିବା ବା ନାମଞ୍ଜୁର କରିବା ନିଷ୍ପତ୍ତି

ମୁଁ ଓଡ଼ିଶା ଜିଲ୍ଲା ପରିଷଦ ଅଧିନିୟମ, 1991ର ବ୍ୟବସ୍ଥା ଅନୁସାରେ ଏବଂ ତଦଧୀନ ପ୍ରଣୀତ ନିୟମାବଳୀ ଅନୁଯାୟୀ ଏହି
ମନୋନୟନ ପତ୍ରଟିକୁ ପରୀକ୍ଷା କରି ଦେଖୁଅଛି ଏବଂ ନିମ୍ନମତେ ନିଷ୍ପତ୍ତି କରୁଅଛି :-

*ମନୋନୟନ ପତ୍ର ଗ୍ରାହ୍ୟ/ଅଗ୍ରାହ୍ୟ

ତାରିଖ
..... ନିର୍ବାଚନ ଅଧିକାରୀ

भारतीय गैर न्यायिक



ଓଡ଼ିଶା ଆଠିଶା ODISHA

BANABASI MAHARANA
NOTARY, BUGUDA(GANJAM)

53AA 236232

Sl. No 23 Date 20-01-2022

Time 4:00 PM Place- Buguda

BEFORE THE NOTARY PUBLIC SRI BANABASI MAHARANA, BA, LLB, BUGUDA, GANJAM
AFFIDAVIT

For Election to the Office of MEMBER of GANJAM ZILLA PARISHAD of Ganjam District.
Buguda Block (1), Balipadar (Zone No. 41)

I SMT. SAMITA SWAIN W/O- TUKUNA SWAIN OF VILLAGE ARAKHAPUR, PS-
BUGUDA, DIST.- GANJAM candidate at the above election do here by 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 in the following for which convicted:
NIL

III) Date of Conviction: NIL

IV) Court by which convicted: NIL

V) Punishment imposed (indicate period of imprisonment awarded and/or Quantum of
the imposed.): NIL

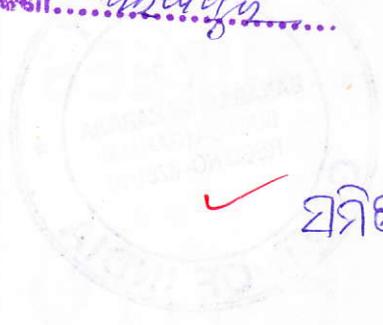
VI) Details of appeal/revision etc. against conviction: NIL

(Repeat the above sequence in respect of each separate case of conviction.)

ସମିତା ସ୍ୱାଇଁ

BANABASI MAHARANA
NOTARY
BUGUDA (GANJAM)

ସଂ. ନଂ.....399
ତା. 17.01.2022 10/10
ନାମ.....ଶ୍ରୀମତୀ ସୁମିତ୍ରା
ଠିକଣା.....ପୁରୀ



✓ ସମ୍ପୂର୍ଣ୍ଣ ସ୍ୱାକ୍ଷର



S.V.S.R.O
S.V.S.R.O
BUGUDA, (GM)

NOTARY BUGHADA (MALAM)
S. No. Date

NOTARY
BUGUDA (MALAM)



//2//

(B) That I have in the past been discharged /acquitted in the following cases.

I) Section of the Act and description of the offence with which charged:

NIL

II) The Court which had taken cognizance: NIL

III) Case No.: NIL

IV) Details of appeal /application for revision etc. if any filled against above order taking cognizance: NIL

(C) That 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

I) The Court which has taken cognizance: NIL

II) Case No.: NIL.

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

✓ ସମସ୍ତ ସ୍ତମ୍ଭ


20.01.22
BANABASI MAHARANA
NOTARY
BUGUDA (GANJAM)

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NOTARY



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2. That / My spouse/my dependants *** own the following immovable properties:-

(A)

Agriculture Land (s)	Location	Area	Approx present market value according to you
Self Name	NIL	NIL	NIL
Spouse (Give Name) Tukuna Swain (Husband)	Mouza- Arakhapur	AC- 0.075 AC- 0.820 AC- 0.019	Rs. 30,000/- Rs. 1,00,000/- Rs. 2,00,000/-
Dependant son(s) (Give Name(s))	NIL	NIL	NIL
Dependent daughter(s) (Give Name(s))	NIL	NIL	NIL
Dependent (others) (Give Name and relationship) Smt. Sima Swain (Mother-in-Law)	Mouza - Arakhapur	AC- 1.0300 AC- 0.1030 AC- 0.1430	Rs. 3,00,000/- Rs. 60,000/- Rs. 1,00,000/-
Lt. Narana @ Narayan Swain (Father-in-Law)		AC- 0.8050	Rs. 10,00,000/-
In Joint Name(s) (Give Name)	NIL	NIL	NIL

(B)

Urban Land (s)	Location	Area	Approx present market value according to you
Self Name	NIL	NIL	NIL
Spouse (Give Name)	NIL	NIL	NIL
Dependant son(s) (Give Name(s))	NIL	NIL	NIL
Dependent daughter(s) (Give Name(s))	NIL	NIL	NIL
Dependent (others) (Give Name and relationship)	NIL	NIL	NIL
In Joint Name(s) (Give Name)	NIL	NIL	NIL

✓ ସମିତା ସ୍ୱାକ୍ଷର

BT
BANABASI MAHARANA
NOTARY
BUGUDA (GANJAM)
20-01-22

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BT
NOTARY
20-01-22

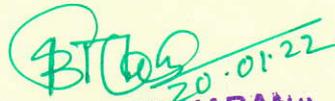


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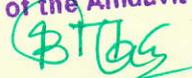
3. (A) That I/My Spouse/My dependants*** own the following movable property,

	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/grams /car at)	Approx Present market value according to you	Silver & silver ornaments (In Tolas/ Grams)	Approx present market value according to you
Self Name	NIL	NIL	100 Gram	Rs. 5,00,000/-	120 Gram	Rs. 25,000/-
Spouse (Give Name) Tukuna Swain (Husband)	One ERTIGA Car vide No. OD33E4949	Rs. 5,50,000/-	20 Gram	Rs. 1,00,000/-	NIL	NIL
Dependant son(s)(Give Name(s))	NIL	NIL	NIL	NIL	NIL	NIL
Dependent daughter(s) (Give Name(s))	NIL	NIL	NIL	NIL	NIL	NIL
Dependent (others) (Give Name and relationship)	NIL	NIL	NIL	NIL	NIL	NIL
In Joint Name(s) (Give Name)	NIL	NIL	NIL	NIL	NIL	NIL

✓ ସମସ୍ତ ସ୍ୱତନ୍ତ୍ର


BANABASI MAHARANA
NOTARY
BUGUDA (GANJAM)

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NOTARY
20.01.22

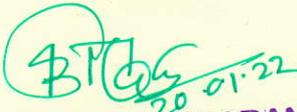


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3. (B) That I/My Spouse/My dependants*** own the following Bank Balance/details.

	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	NIL	NIL	IOB, Balipadar	Rs. 30,000/-	NIL	NIL
Spouse (Give Name) Tukuna Swain (Husband)	NIL	NIL	1.IOB Balipadar 2.Canara Bank, Khurda Branch 3.UCO Bank, Khurda 4.Bank of India, Khurda	Rs. 7,68,992/- Rs. 7,120/- Rs. 10,000/- Rs. 30,000/-	NIL	NIL
Dependant son(s) (Give Name(s))	NIL	NIL	NIL	NIL	NIL	NIL
Dependent daughter(s) (Give Name(s))	NIL	NIL	NIL	NIL	NIL	NIL
Dependent (others) (Give Name and relationship)	NIL	NIL	NIL	NIL	NIL	NIL
In Joint Name(s) (Give Name)	NIL	NIL	NIL	NIL	NIL	NIL

✓ ସମସ୍ତ ସ୍ୱତନ୍ତ୍ର


BANABASI MAHARANA
NOTARY
BUGUDA (GANJAM)

Forms Part of the Affidavit


NOTARY
20.01.22



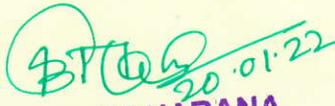
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4. That I/My Spouse/My dependants*** are liable to pay the following dues to public financial institutions and Government dues (Give Details).

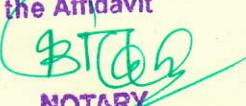
	Government Dues		Income Tax Dues	Dues to Financial Institutions	Any other Dues
	Details of the Nature of demand /Dues	Amount			
Self Name	NIL	NIL	NIL	NIL	NIL
Spouse (Give Name)	NIL	NIL	NIL	NIL	NIL
Dependant son(s) (Give Name(s))	NIL	NIL	NIL	NIL	NIL
Dependent daughter(s) (Give Name(s))	NIL	NIL	NIL	NIL	NIL
Dependent (others) (Give Name and relationship)	NIL	NIL	NIL	NIL	NIL
In Joint Name(s) (Give Name)	NIL	NIL	NIL	NIL	NIL

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

✓
ସମସ୍ତ ସ୍ୱାଧୀନ


BANABASI MAHARANA
NOTARY
BUGUDA (GANJAM)

Forms Part of the Affidavit


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20.01.22



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5. My Educational Qualification are as under:
(Give the details of school & University Education)

- 1) Passed 10th from Sardar Antaryami Bldyapitha, B.Karadabadi, Ganjam.

I, SAMITA SWAIN 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 there from.

VERIED AT BUGUDA THIS THE 20TH DAY OF JANUARY 2022.

Witness

- ✓ 1) ଭକ୍ତ ଚନ୍ଦ୍ର ଚଉଧୁରୀ
- ✓ 2) ଶରଣାଳୟ ଚଉଧୁରୀ

Identified by me

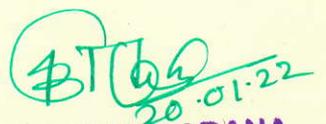

Adv, Buguda
20.1.22

Devi Nivedita Choudhury
ADVOCATE
Buguda, Ganjam

DECLARATION

The deponent having been duly identified by Smt. Devi Nivedita Choudhury Advocate, Buguda on this 20th Day of...January..2022 at AM/PM solemnly affirmed and stated before me that the contents mentioned in this affidavit are true the best of his/her knowledge Information and belief.

✓ ସମିତା ସ୍ୱାଇଁ
Deponent


20.01.22
BANABASI MAHARANA
NOTARY
BUGUDA (GANJAM)