

3.10 PM

ପାରମ ସଂଖ୍ୟା-4  
[ନିୟମ 12 (10) ଦ୍ରଷ୍ଟବ୍ୟ]  
ମନୋନୟନ ପତ୍ର

~~ଅ.ନ.~~ 05

..... ଚାକ୍ଷୀମ ..... ଜିଲ୍ଲାର ଜିଲ୍ଲା ପରିଷଦ ନିମନ୍ତେ ନିର୍ବାଚନ ।

ମୁଁ ଜିଲ୍ଲା ପରିଷଦ ନିର୍ବାଚନ ନିମନ୍ତେ ..... ୧୨ ଇଲିକୋଟ-୨ ..... ପରିଷଦ ନିର୍ବାଚନ ମଣ୍ଡଳୀରୁ ନିମ୍ନଲିଖିତ

ବ୍ୟକ୍ତିକୁ ପ୍ରାର୍ଥୀ ଭାବରେ ମନୋନୀତ କରୁଅଛି ।

ପ୍ରାର୍ଥୀଙ୍କ ନାମ ..... ଶ୍ରୀମତି ସାଚାଣ୍ଡୀ ସେନୀ

ପିତା/ପତିଙ୍କ ନାମ ..... ବାପୁଜୀ ହୁମାଡ଼ ସେନୀ

ତାଙ୍କର ଡାକ ଠିକଣା ..... ଗ୍ରା/ଗୋ :- ଚିଲିକା ଗ୍ରାମ୍ୟ - ଇଲିକୋଟ ଚାକ୍ଷୀମ

..... ୧୨ ଇଲିକୋଟ ..... ପରିଷଦ ନିର୍ବାଚନ ମଣ୍ଡଳୀର ଗୋଟିଏ ଚାଲିକାରେ ତାଙ୍କ ନାମ ଦରଜ ହୋଇଥିବା

କ୍ରମିକ ସଂଖ୍ୟା ..... ୪୪ ସ୍କେ. ନଂ - ୧୧

ମୋର ନାମ ..... ଶ୍ରୀକାନ୍ତ ସେନୀ ..... ଅଟେ ଏବଂ ..... ୧୨ ଇଲିକୋଟ

ପରିଷଦ ନିର୍ବାଚନ ମଣ୍ଡଳୀର ଗୋଟିଏ ଚାଲିକାର କ୍ରମିକ ସଂଖ୍ୟା ..... ୨୦୦ ସ୍କେ. ନଂ - ୮ ..... ରେ ତାହା

ଦରଜ କରାହୋଇଅଛି ।

ତାରିଖ ..... ୨୦.୦୧.୨୦୨୨

Saikanta Setty  
ପ୍ରସାବକ ସ୍ଵାକ୍ଷର

ମୋର ନାମ ..... ପ୍ରଭାକର ଜେନା ..... ଅଟେ ଏବଂ ..... ୧୨ ଇଲିକୋଟ

ପରିଷଦ ନିର୍ବାଚନ ମଣ୍ଡଳୀର ଗୋଟିଏ ଚାଲିକାର କ୍ରମିକ ସଂଖ୍ୟା ..... ୪୫ ସ୍କେ. ନଂ - ୪ ..... ରେ ତାହା ଦରଜ

ହୋଇଅଛି ।

ତାରିଖ ..... ୨୦.୦୧.୨୦୨୨

ପ୍ରଭାକର ଜେନା  
ସମର୍ଥକ ସ୍ଵାକ୍ଷର

ମୁଁ ଉପର ମନୋନୀତ ପ୍ରାର୍ଥୀ ମନୋନୟନ ପ୍ରତି ସମ୍ମତି ଜଣାଉଛି ଏବଂ ଏତଦ୍ଵାରା ଘୋଷଣା କରୁଅଛି ଯେ-

(କ) ମୋର ବୟସ ..... ୩୧ ବର୍ଷ ..... ବର୍ଷ ସଂପୂର୍ଣ୍ଣ ହୋଇଅଛି ।

(ଖ) ମୁଁ ..... ଡାକ୍ତରୀ, ଡାକ୍ତରୀ କର୍ମେଷୁ ..... ଦଳଦ୍ଵାରା ଏହି ନିର୍ବାଚନରେ ଛିଡା ହୋଇଛି ।

(ଗ) ପସନ୍ଦ ହୋଇଥିବା ସଂକେତ, ପସନ୍ଦ କ୍ରମରେ (i) ..... ଦ୍ଵାରା ଚିହ୍ନ

(ii) ..... ଏବଂ (iii) .....

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

(ଙ) ମୋର ଜ୍ଞାନ ଓ ବିଶ୍ୱାସ ଅନୁଯାୟୀ ମୁଁ ପ୍ରାର୍ଥୀ ହେବା ପାଇଁ ଯୋଗ୍ୟ ଏବଂ ଯଦି ମୋତେ ..... ମୋ ଠିକ୍  
ଚାକ୍ଷୁଷ  
..... ଜିଲ୍ଲାର ଜିଲ୍ଲା ପରିଷଦର ଆସନ ପୂରଣ ନିମନ୍ତେ ପସନ୍ଦ କରାଯାଏ ତେବେ ମୁଁ  
ଅଯୋଗ୍ୟ ନୁହେଁ ।

ପୁନଶ୍ଚ ମୁଁ ଘୋଷଣା କରୁଅଛି ଯେ ମୁଁ ..... ଯୋଗ୍ୟ, ଅନୁସୂଚିତ ଜାତି ଭାବେ  
\*\*ଜାତି/ଜନଜାତିର ସଦସ୍ୟ ଯାହାକି ଓଡ଼ିଶା ରାଜ୍ୟର ଅନୁସୂଚିତ ଜାତି/ଅନୁସୂଚିତ ଜନଜାତି/ପଲ୍ଲୀଆବର୍ଗ ନାଗରିକ  
ଅଟେ ।

ତାରିଖ ..... ୨୦.୦୧.୨୦୨୨

Sagari Sethi  
ପ୍ରାର୍ଥୀଙ୍କ ସ୍ୱାକ୍ଷର

\* ପ୍ରଯୋଜ୍ୟ ହେଉନଥିବା ପାଇଁ କାଟି ଦିଅନ୍ତୁ ।

\*\* ପ୍ରଯୋଜ୍ୟ ହେଉନଥିବା ସ୍ଥାନକୁ କାଟି ଦିଅନ୍ତୁ ।

(ନିର୍ବାଚନ ଅଧିକାରୀଙ୍କଦ୍ୱାରା ପୂରଣ କରାଯିବ)

ମନୋନୟନ ପତ୍ର କ୍ରମିକ ସଂଖ୍ୟା .....

ଏହି ମନୋନୟନ ପତ୍ର ମୋତେ ମୋର କାର୍ଯ୍ୟାଳୟରେ .....

ତାରିଖରେ ..... ସମୟରେ ପ୍ରାର୍ଥୀ/ପ୍ରସ୍ତାବକଙ୍କ ଦ୍ୱାରା ଦିଆଗଲା ।

ତାରିଖ .....

ନିର୍ବାଚନ ଅଧିକାରୀ

ନିର୍ବାଚନ ଅଧିକାରୀଙ୍କର ମନୋନୟନ ପତ୍ର ମଞ୍ଜୁର କରିବା ବା ନାମଞ୍ଜୁର କରିବା ନିଷ୍ପତ୍ତି

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

\* ମନୋନୟନ ପତ୍ର ଗ୍ରାହ୍ୟ/ଅଗ୍ରାହ୍ୟ

ତାରିଖ .....

ନିର୍ବାଚନ ଅଧିକାରୀ

भारतीय गैर न्यायिक

दस  
रुपये  
रु.10



TEN  
RUPEES  
Rs.10



INDIA NON JUDICIAL



ओडिशा ODISHA

AFFIDAVIT

54AA 917732

(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 Parishada Zone No.12 in Khallikote Block of Ganjam District / Member of Zone No.12, Zilla Parishada of Ganjam District / Corporator of ..... Municipal Corporation of ..... District/ Councillor of..... Municipality/ N.A.C. of ..... District.

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

I, Smt. Sagari Sethy, aged about 21 years, W/O: Sri Badal Kumar Sethy Permanent resident of Vill/ PO: Chikili, PS/ Block: Khallikote, Dist: Ganjam in the state of Odisha 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:- Not Applicable.

- (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
- (v) Punishment imposed (indicate of imprisonment awarded and/or quantum of the fine imposed)--- NIL
- (vi) Details of appeal/revision etc. against conviction. ---NIL

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

Form Part of Affidavit  
NOTARY, KHALLIKOTE

Sagari Sethy

P.T.O.

୧୫.୧୧.୨୦୧୯

ସଂଗୀତ ସେଥି (ସାମ ଭେଷର)  
(ଖଲ୍ଲିକୋଟ)



Sagari Sathy



Faint, mostly illegible text from a document, possibly a legal notice or affidavit, with some handwritten notes at the bottom.

भारतीय गैर न्यायिक

एक रुपया

ONE RUPEE



सत्यमेव जयते

भारत INDIA

INDIA NON JUDICIAL



ओडिशा ODISHA

08AA 606400

- 2 -

(B) That I have in the past been discharge/acquitted in the following case(s): Not applicable.

(i) Section of the Act and description of the offence with which charged	Present market value according to year
(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	

(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 has been taken by the court: Not Applicable.

- (i) Section of the Act and description of the offence for which cognizance taken: NIL
- ...
- (ii) The court which has taken cognizance: NIL
- ...
- (iii) Case No: NIL
- (iv) Details of appeal/application for revision etc., if any, filled against above order taking cognizance: NIL

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

Form Part of Affidavit

NOTARY, KHALLIKOTE

*[Handwritten signature]*

Sagarci Sethy

ନଂ ୨୨..... ଚାମ୍ପ-୧-୨୨୧/୧



ସୁ. କୁମାର (ସାମ ଭେଦର)  
(ଖଲିବୋଟ)

Sagarci Sethy



I have in the past been discharged in the following cases, Not applicable.

(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, filed against above order taking cognizance Nil.

(v) Request the above request in respect of each separate case of discharge (acquittal) for the court: Not Applicable.

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

(v) Request the above request in respect of each separate case discharge (acquittal):

Sagarci Sethy

Handwritten signature and notes at the bottom right.

Form Part of Affidavit  
NOTARY KHALI NOTE

भारतीय गैर न्यायिक

एक रुपया

ONE RUPEE



रु.1

Re.1

सत्यमेव जयते

भारत INDIA

INDIA NON JUDICIAL



बिनायक साहू ODISHA

08AA 825736

-3-

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.

2. That, I/my spouse/my dependants\*\*\* own the following immoral properties:-

(A)

Agricultural Land(s)	Location	Area	Approx. Present market value according to your
Self Name	NIL	NIL.	NIL
Spouse: [Give name (s)]	NIL	NIL	NIL
Deponent Son(s) [Give name(s)]	NIL	NIL	NIL
Deponent daughter(s) [Give name(s)]	NIL	NIL	NIL
Dependant (others) Give name and relationship)	NIL	NIL	NIL
In Joint name(s) (Give Names) relationship)	NIL	NIL	NIL

Form Part of Affidavit  
NOTARY, KHALLIKOTE

*Sagari Sethy*

№ 28 ଚା. 19.1-22/1

DISTRICT  
  
 STAMP SECTION  
 GANJAM CHATRAPUR

ସା. କ. ସେ. (ସା. କ. ସେ.)  
 (ଖଲିବୋତ)

Sagarini Sethy

08AA 82573E



Information against any of the columns at (A), (B), (C) or (D) in this form, during the  
 corresponding column and state in the sub-columns below.  
 (For any necessary dependents\*\* own the following immovable properties:-)

Agricultural Land(s)	Location	Area	Approx. present market value according to your
Self Name	NIL	NIL	NIL
Spouse	NIL	NIL	NIL
[Give name (s)]	NIL	NIL	NIL
Dependent (son/s)	NIL	NIL	NIL
[Give name(s)]	NIL	NIL	NIL
Dependent (daughter/s)	NIL	NIL	NIL
[Give name(s)]	NIL	NIL	NIL
Dependent (other)	NIL	NIL	NIL
[Give name and relationship]			
In Joint name(s) [Give Names]			

Form Part of Affidavit  
 NOTARY, KHALI KOTE  
 Sagarini Sethy

भारतीय गैर न्यायिक

एक रुपया

ONE RUPEE



सत्यमेव जयते

भारत INDIA

INDIA NON JUDICIAL



ओडिशा ODISHA

- 4 -

08AA 825737

Urban Land(s)	Location	Area	Approx. Present market value according to you
Self Name	NIL	NIL	NIL
Spouse (Give Name)	NIL	NIL	NIL
Deponent Son(s) [Give name(s)]	NIL	NIL	NIL
Deponent daughter(s) [Give name(s)]	NIL	NIL	NIL
Dependant (others) Give name and relationship)	NIL	NIL	NIL
In Joint name(s) (Give Names) Mother	NIL	NIL	NIL

Part of Affidavit

ARY, KHALIKOTE

Sagarci Sethy

No. 27 dated 19.1.22

DISTRICT



STAMP SECTION  
CUTTACK

(Signature)  
(Name)

Sagari Sethy



Self Name	Location	Area	Approximate Present Market Value according to you
NIL	NIL	NIL	NIL
Spouse (Give Name)	NIL	NIL	NIL
Dependent 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(s) Mother)	NIL	NIL	NIL

Sagari Sethy

Form Part of Affidavit  
NOTARY KHALI NOTE

# भारतीय गैर न्यायिक

एक रुपया

ONE RUPEE



भारत INDIA

INDIA NON JUDICIAL

-5-

3(A) That I/my spouse/my dependants\*\*\* own the following movable property **08AA 825738**



1	2	3	4	5	6	7
Self Name	Motor vehicle with description such as car, jeep, truck, Blus	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
	NIL	NIL	NIL	NIL	NIL	NIL
Spouse [Give Name]	NIL	NIL	NIL	NIL	NIL	NIL
Deponent Son(s) [Give name(s)]	NIL	NIL	NIL	NIL	NIL	NIL
Deponent daughter(s) [Give name(s)]	NIL	NIL	NIL	NIL	NIL	NIL
Dependant (Others) Give name	NIL	NIL	NIL	NIL	NIL	NIL
In Joint name (s) [Give names] Father -in-law Tuna Sethy	Alfa Auto No. OR07V2702	Rs.30,000/-	NIL	NIL	NIL	NIL

Form Part of Affidavit

NOTARY, KHALLIKOTE

*[Handwritten Signature]*  
Sagar Sethy





ओडिशा ODISHA

08AA 825739

- 6 -

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

	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
1	2	3	4	5	6	7
Self Name	SBI, Polasara	NIL	NIL	Rs.5,000/-	NIL	NIL
Spouse [Give Name)Badal Kumar Sethy	SBI, Khallikoite	NIL	NIL	Rs.5,000/-	NIL	NIL
Deponent Son(s) [Give name(s)]	NIL	NIL	NIL	NIL	NIL	NIL
Deponent daughter(s) [Give name(s)]	NIL	NIL	NIL	NIL	NIL	NIL
Dependant (Others)Give name	NIL	NIL	NIL	NIL	NIL	NIL
In joint name(s) (Give Name)	NIL	NIL	NIL	NIL	NIL	NIL

Form Part of Affidavit  
NOTARY, KHALLIKOTE

Sagarci Sethy



# भारतीय गैर न्यायिक

एक रुपया

ONE RUPEE



सत्यमेव जयते

भारत INDIA

INDIA NON JUDICIAL



ओडिशा ODISHA

08AA 825740

- 7 -

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

1	Governments Dues		Income Tax Dues	Dues to Financial Institutions	Any Other Dues
	2	3			
	Details of the nature of demand/dues	Amount	4	5	6
Self Name	NIL	NIL	NIL	NIL	NIL
Spouse [Give Name]	NIL	NIL	NIL	NIL	NIL
Deponent Son(s) [Give name(s)]	NIL	NIL	NIL	NIL	NIL
Deponent daughter(s) [Give name(s)]	NIL	NIL	NIL	NIL	NIL
Dependant (Others) Give name	NIL	NIL	NIL	NIL	NIL
In joint name(s) (Give Names)	NIL	NIL	NIL	NIL	NIL

P.T.O

Form Part of Affidavit

NOTARY, KHALLIKOTE

Sagarci Sethy

*[Handwritten signature]*





DISTRICT



STAMP SECTION  
GANJAM CHATRAPATI

№. 23 ..... ଚା. 19.1.22/1

*(Signature)* (ଆମ ଲେଖକ)  
(ଖଲିକୋଟ)

Sagarini Sathy



My education qualification are as under: (Give the details of School & University)  
(ମାଧ୍ୟମିକ) - 7 Passed in Regional Women's College, Puri, Dist. Ganjam.

I, Smt. Sagarini Sathy, 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 material has been concealed there from.

Verified at Khallikot on the 18<sup>th</sup> day of January 2022.

*(Signature)* Sagarini Sathy

*(Signature)*  
Advocate Khallikot

Depositor

Witness

The deponent being identified by  
Sh. *(Signature)* Advocate on  
this *(Signature)* A.A.M.  
solemnly affirms and state on oath.

Notary  
SRI BINAYAK SAHU, LL.M. NOTARY  
Govt. of Odisha  
Regd. No 1278 Exn. 04/27/2020  
Khallikote Dist. Ganjam Pin-751032  
Mph- 92370794