

54AA 679223 **ODISHA** FORMAT OF AFFIDAVIT (to be submitted by candidate Election Officer/Returning Officer as an accompaniment to the Nomination Paper) For election to the office of Sarpanch of Block of _____ District / Member of ____ of District / Member of ZONE OF Zilla Parishad of _______ District / Corporator of _____ municipal corporation _____ District / Counciller of ___ District. Municipality / N.A.C of (*Please strike off the ones not applicable to you) Son/daughter/ wife of SAVIA SABAR IMALATI SABAR 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:-Case no. _____ Section of the Act and description of the offence for which convicted. Date of conviction ______XX iii) iv) Court by which convicted Punishment imposed (indicate period of imprisonment awarded and or quantum of Details of appeal/revision etc. against conviction

1

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



If information against any of the column 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 immovable properties: (A)

Agricultural Land(s)	Location	Area	Approx. Present Market Value according to you
Self Name MALATI SABAR.	2151	V5. (221
Spouse (Give name) SAMA SABAR	aril	oxi/	Nil
Dependant son(s) (Give Name(s))	as'l	I'ss	Nil
Dependant Daughter(s) (Give name(s))	ovil	ari	asil
Dependent (others) (Give name and relationship)	Nil	mil	VV. (
In joint name (s) (Give names)	as'	wil	ne/

× AIREIZEO



(B)

Forms

K.Ch.

(B)	•		Paralakiroati) (Gajapati)
Urban Land(s)	Location	Area	Approx. Present Market Value according to you
Self Name Malati Sebar	on'	NI	22
Spouse (Give name) SAMIA Sabar.	wil	oril	ni)
Dependant son (s) (Give name(s))	azil	ovi)	M'
Dependant daughter (s) (Give name(s))	on'l	ris	ar's
Dependant (others) (Give name and relationship)	ovi)	avi!	ne 1
In joint name(s) (Give names)	mil	mi	

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/gram/carat)	Approx. present market value according to you	Silver & Silver ornaments (in tolas/grams)	Approx. present market value according to you
Malate', Sabar	wil	mil	1/2+01a	IS,000 l	- Itola	1000.00
Spouse (Given Name)	Ni!	neil	W2	Ovi I	Nil	NZ)
SABAR Dependant on (s) (Give name (S))	aril	mi!	ni)	1	or'l	Ni!
Pari	•					

Dependant daughter (s) (Give name (s))	Maril	azi l	mi(Nr'l	NE RO	Regd. No. W. 21 Regd. No. W. 21 Regd. No. W. 21
Dependant (others.) give name and relationship	ns'	ovi)	avz 1	Ni!	Ne'l	wi)
In joint name(s)	X ž l	on'l	NS. I	ars')	XI	044.1
(Give names)	0081				VV+ /	Mp'/

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

Self name	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
Malate Sapar	Nil	0/5.(0/21	√2	Mil.	NOT
Spouse (Give name (s)) SANIA SABAR	ar!	M2'1	ovil	NOI	Mil:	Ni/
Dependant son(s) (Give name(s))	mil	M'I	azil	oz l	ovil	Ni)

1919 E1 290L



					10	1
Dependant daughter (s) (Give name(s))	sril	avil	NI.	Ni/	- Carrier /	Ch. Panul Iralakiieniui (Caup (ci) Regd. No-011-21 Exp.
Dependant (others) (Give name and relationship)	ouil	on'l	Nil	ovil	N2:1	ar'l
In Joint name (s) (Give names)	70.51	1921	W2'1	\\chi'(Mil	192/

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	Any other	
	Details of the nature of demand/dues	Dues	Financial Institution	Dues	
Self name					
Malati	∞2')	av, I	aril	Nil	
Spouse (Give name) CANIA SA	BAR Oril	ors' (wil		
Dependant		0021	(13/0)	Nil	
son(s) (Give name(s) No	Nil .	onil	soi!	mi)	
Dependent daughter(s) (M) Give name(s)]	2011	oril	oxil	ari)	
Dependant others) (Give same) No	ori (pri 1	avz' 1	di)	
n Joint name				002/	
s) (Give No	No!	m'l	ZR'	ovil	
** Dependant m	eans a person 1				

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



PAIME1 AGO

LITERATE My educational qualification are as under: 5. Class. 1 Class P.S. Allada Anganwad (Give the details of School & University Education) Malaté Sabar. 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. Verified at Portalat Doutens, this the _____ DIA day of _____ Ten_ 2022.

Witnesses:

1. Kasfir Slow 2. AQREYAZ



· 918 818 80

Deponent



ne declarants having yeer ide itilied affirmed before me on this the of 22 at 11 no am/or con tents having been read over and expl ained to the declorant who appears to nave perfectly understood the contents and the theme of maying his affiday