S.No.	Descripmen	Name and address of Bank / Financial Institution(s) / Department(s)	Amount outstanding as on
(b) (i)	Income Tax including surcharge [Also indicate the assessment year upto which Income Tax Return filed. Give also Permanent Account Number (PAN)]	PAN NO. BMKPS7288D DR. Safam Ranjan singh	NIL-
(ii)	Wealth Tax [Also indicate the assessment year upto which Wealth Tax return filed.]	N·A.	NIL
(iii)	Sales Tax [Only in case of proprietary business]	N·A·	NIL
(iv)	Property Tax	NIL	NIL

	(iv)	Property 1 ax	NIL	NIL	
	(4)	My educational qualifica	tions are as under :-		
ant feteris	(GIVE Schol)	DETAILS OF SCHOOL	AND UNIVERSITY EDUCATION) Sout Anthony school shillowy - 2 -	1988; iii) DAV. Public	_ schaf Ghaziabad
			and the year in which the course was		
B. Pkoikala	hostitui	college, foipur - MBG te of Health Sciences, D)haran - MD (2005),	Lanjan DEPONENT	
			<u>VERIFICATION</u> (DR. SAPAM RA	NSAN SINGH)
	I, the deponent abovenamed, do hereby verify and declare that the contents of this affidavit are true and correct to the best of my knowledge and belief; no part of it is false				
		thing material has been co	ne 25 ^{fh} day of January, 2011.	. Ranjan	
			<i>V</i>	DEPONENT	
	•			(DR. SAPAM	RANZAN SINGH
is in the state of	the condentification of the co	of the seems of the declarate of by S. July Single on their being read need to bins.	1 was 1. Iboyaima Singh Cath Commissioner (Judicial)		