

Form 26 (See rule 4A)

Affidayit to be	furnished by the candidate before the returning officer for election to 1915 Medical form (name of the House) from - 32 - 63 - 65 - 65 - 65 - 65 - 65 - 65 - 65
sislatu t	(name of the House) from -31-60-67
constituency(na	me of the constituency)
, de 19	reishna Sent / Latin & Latin R. Zali Se gred about-
124	years, resident of — Zoli Se aged about -
candidate at the	above election, do hereby solemnly affirm/state on oath as under:-
I,	I am/am not accused of any offence(s) punishable with imprisonment for
	two years or more in a pending case(s) in which a charge(s) has/have been framed by the court(s) of competent jurisdiction.
1,773	t is accused of any such offence(s) he shall furnish the following
information:	
(i)	Case/First information report No./Nos
(ii)	Police station(s) District (s) State(s)
(iii)	Section(s) of the concerned Act(s) and short description of the offence(s)
for wh	ich the candidate has been charged
(iv)	Court(s) which framed the charge(s)
(v)	Date(s) on which the charge(s) was/were framed
(vi)	Whether all or any of the proceeding(s) have been stayed by any court(s)
of cor	npetent jurisdiction
	been/have not been convicted of an offence(s) [other than any offence(s)
referred to in	sub-section (1) or sub-section (2), or covered in sub-section (3), of section 8 entation of the People Act, 1951 (43 of 1951)] and sentenced to
7.5	for one year or more.
If the	deponent is convicted and punished as aforesaid, he shall furnish the
following info	
(i)	Case/First information report No/Nos
(ii)	Court(s) which punished
(iii)	Police station(s) District (s) State(s)
(iv)	Section(s) of the concerned Act(s) and short description of the offence(s)
	W. S.

	(v) (vi)	Date(s) on which the sentence (s) was/were pronoun. Whether the sentence(s) has/have been stayed by any competent jurisdiction	court(s) of
	Place	Thousal	Signature of deponent
Date:	161	ulet.	Сорхист

VERIFICATION

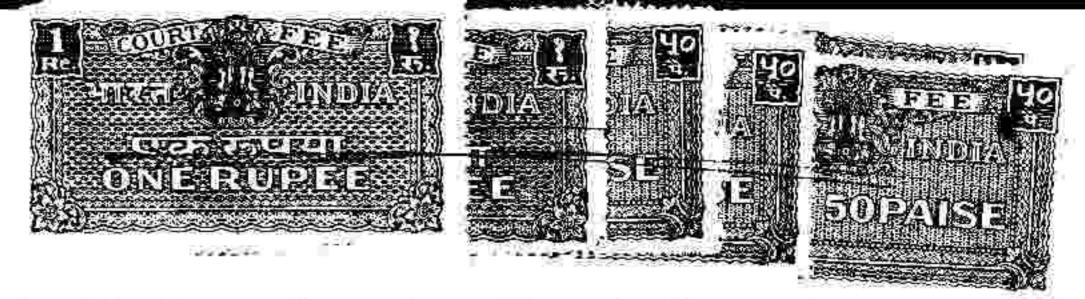
I, the above-named deponent, do hereby verify and declare that the contents of this affidavit are true and correct to the best of my knowledge and belief, no part of it is false and nothing material has been concealed therein.

Verified at Part Three al this - to felo 1, day of 300000 200 7

J. Mina

Signature of deponent

Note: The columns in this Form which are not applicable to the deponent may be struck off."



Affidavit to be furnished by candidate alongwith nomination paper

for election to <u>Kezisla fine Assembly</u> (name of the House)

from <u>3A. Hangjuig Tuntla</u> constituency

(name of the constituency)

1, Shei, Leistram Kreiskaa Gron/daughter/wife of Late L. Wall Swing aged 63 years, resident of Wangjirig Hodened, candidate at the above election, do hereby solemnly affirm and state on oath as under:(Strike out whichever not applicable)

- (1) 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:
 - (ii) The Court which has taken cognizance:
 - (iii) Case No.:
 - (iv) Date of order of the Court taking cognizance :
 - (v) Details of appeal(s) / application(s) for revision, etc., if any, filed against above order taking cognizance:

(2) That I give hereinbelow the details of the assets (immovable, movable, bank balance, etc.) of myself, my spouse and dependents*:

A. Details of movable assets.

(Assets in joint name indicating the extent of joint ownership will also have to be given)

S. No:	Description	Self	Spouse(s) Name(s):	Dependent-1 Name:	Dependent-2 Name:	Dependent-3, etc. Name:
(i)	Cash				338/	
(ii)	Deposits in Banks, Financial Institutions and Non-Banking Financial Companies	3.5				
(iii)	Bonds, Debentures and Shares in companies		1		*	
(iv)	Other Financial instruments NSS, Postal Savings, LIC, Policies, etc.	-				
(v).	Motor Vehicles (details of make, etc.)	<i>y</i>	+	: e-	***	>~.
(vi)	Jewellery (give details of weight and value)		***		***	\$ === 8
(vei)	Other assets, such as values of claims / interests					//

Note: Value of Bonds / Shares / Debentures as per the latest market value in Stock Exchange in respect of listed companies and as per books in the case of non listed companies should be given.

^{*}Dependent here means a person substantially dependents on the income of the candidate

B. Details of Immovable assets

[Note: Properties in joint ownership indicating the extent of joint ownership will also have to be indicated]

S. No.	Description	Self	Spouse(s) Name(s):	Dependent-I Name:	Dependent-2 Name:	Dependent-3. etc. Name:
(i)	Agricultural Land - Location(s) - Survey number(s) - Extent (Total measurement) - current market value	,	₽ , ≥			*
(ii)	Non-Agricultural Land - Location(s) - Survey number(s) - Extent (Total measurement) - current market value				×	
(iii)	Buildings (commercial and residential) - Location(s) - Survey / door number(s) - Extent (Total measurement) - current market value				Ø 53_	A===
(iv)	Houses / Apartments, etc. - Location(s) - Survey / door number(s) - Extent (Total measurement) - current market value	•				5 17-
(v)	Others (such as interest in property)	* ₹₹.		*===	27 to 62 1 2	

(3) I give hereinbelow the details of my liabilities / overdues to public financial institutions and government dues:-

[Note: Please give separate details for each item]

S.No.	Description	Name and address of Bank / Financial Institution(s) / Department(s)	Amount outstanding
(a) (i)	Loans from Banks	**************************************	
(ii)	Loans from financial institutions		
(iii)	Government ducs:-		
	(a) dues to departments dealing with government accommodation		
	(b) dues to departments dealing with supply of water		
	(c) dues to departments dealing with supply of electricity		***
	(d) dues to departments dealing with telephones		
	(c) dues to departments dealing with government transport (including aircrafts and helicopters)	*	
	(f) other dues, if any		

S.No.	Description	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)]		
(ii)	Wealth Tax [Also indicate the assessment year upto which Wealth Tax return filed.]		
(iii)	Sales Tax [Only in case of proprietary business]		
(iv)	Property Tax		
5		299	

(4)	My educational qualifications are as under :-	Matriculate.	Grewahati	University
(GIV	E DETAILS OF SCHOOL AND UNIVERSITY	EDUCATION)		1
	ne of School / University and the year in which be given.)		npleted should	6.
			DEPONENT	
	VEDIETCATION	ď		

, the deponent at	ovenamed, do herel	by verify and do	eclare that the	contents of this	
affidavit are true ar	id correct to the best	of my knowledge	e and belief; no	part of it is false	
and nothing materia	al has been concealed	therefrom.			32 B
Verified at	this the	day of	, 200	f. Her chama -	BV 1
				DEPONENT	
			###	VANAGE ENGLISHED SONS CONTROL SE	

VERIFICATION