

Form 26 (See rule 4A)

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Affidavit to be fur	nished by the candidate before the returning officer for election to \(\frac{1}{2}
· 医皮肤的复数性性结肠 (1975) (1974) (1974)	E CHATTE CARRESTITION A
L different candidate at the a	
1. 1	and an not accused of any offence(s) punishable with imprisonment for we years or more in a pending case(s) in which a charge(s) has/have been ramed by the court(s) of competent jurisdiction.
information:	accused of any such offence(s) he shall furnish the following
(ii) I (iii) i for which (iv) (vi) (vi)	Case/First information report No /Nos. Police station(s)
referred to m sul of the Represent	een/have not been convicted of an offence(s) [other than any offence(s) b-section (1) or sub-section (2), or covered in sub-section (3), of section 8 anon of the People Act, 1951 (43 of 1951)] and sentenced to gone year or more.
following inform	convicted and pumshed as aforesaid, he shall furnish the lation. Case/First information report Mo/Nos. Count(s) which punished Police station(s) State(s) Section(s) of the concerned Act(s) and short description of the offence(s) for which the candidate has ever been charged

(v) (vi)	Date(s) on which the sentence (s) was/were pronounced	second fill
()	competent jurisdiction	115:50 2 / A
Place	K # 5-9/0 = Ky 5-1	Signatu

Date: 19-61-67

VERIFICATION

1, 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 $\frac{K(2)}{2}$ $\frac{1}{2}$ $\frac{1}{2}$ this $\frac{19}{2}$ day of $\frac{1}{2}$ $\frac{1}{2}$ $\frac{1}{2}$

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

Before the Returning Officer

for election to Illustry Light Light Antily Hestorical (name of the House) from 5/- 5// Sulvisi constituency (name of the constituency) 1. Here the 2 = 7 KIPCIEN , son/daughter/wife of (1-) PALCIAE KIPCIENT aged 2 years, resident of Here & 1 = 445 candidate at the above election, do hereby solemnly affirm and state on oath as under -(Strike out whichever not applicable) The following case(s) is/are pending against me in which cognizance has been (1)taken by the court. Section of the Act and description of the offence for which cognizance (î) taken: The Court which has taken cognizance: (ii) (iii)Case No.: Date of order of the Court taking cognizance: (iv)Details of appeal(s) / application(s) for revision, etc., if any, filed against

HACKHOF KIPGENI

(v)

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-1, etc. Name, rww	, 14 g=20
(i)	Cash	Restant			×d 1/2	~ J.L.	
(ii)	Deposits in Banks. Financial Institutions and Non-Banking Financial Companies		n's	X & Z X & Z X	Ms 5 1/2 9 4	\$ # ₹5 ₹ 4 <u>3</u> 4	
(iii)	Bonds, Debentures and Shares in companies						
(IV)	Other Financial instruments NSS, Postal Savings, LIC Policies, etc		8.1.2	7/26	>\\ \\ \\ \\ \\ \\ \\ \\ \\ \\ \\ \\ \\	×*./ <u>y</u> ,	
(v)	Motor Vehicles (details of make, etc.)		A / 1/2-	X / I	- VIII-	V/V	
(v)	Jewellery (give details of weight and value)	2472	25 / / / ==		18 1 L		
(vii)	Other assets, such as values of claims / interests	* X / X	Žy7-L=	× 1 1	~"//	2 VI (

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
Ų†Š	Agricultural Land - Location(s) - Survey number(s) - Extent (Total measurement) - current market value	275 A	s più j	ŢJ LL		<i>b</i>
(<u>ii</u>)	Non-Agricultural Land - Location(s) - Survey number(s) - Extent (Total measurement) - correct market value		NA ZIJA)			
	Buildings (commercial and residential) - Location(s) - Survey / door number(s) - Extent (Total measurement) - current market value					
(i v)	Houses / Apartments, etc. - Location(s) - Servey / door number(s) - Extent (Total measurement) - current market value	1) = 10 7' - 2 1 1 4 4 - 4 1 - 2	4-4% F			
(W)	Others (such as interest in property)	l ≈i t L	NII L		1°94:1 4=	NIL



(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 as on
(a) (i)	Loans from Banks		
(ii)	Loans from financial institutions	7V16-	18 2
(iii)	Gevernment dues:-		
	(a) dues to departments dealing with government accommodation	N///-	,A/12-
	(b) dues to departments dealing with supply of water	~ \ /	1112-
	(c) dues to departments dealing with supply of electricity	×1/1/2-	~/12-
	(d) dues to departments dealing with telephones		8.1.1 6-
	(e) dues to departments dealing with government transport (including aircrafts and helicopters)	~~ × ×	SW Z
	(i) other dues, if any	INT <u>L</u>	7~4 / <u>1</u>



S No	Description	Name and address of Bank / Financial Institution(s) Department(s)	Amount ontstanding as on
(b) (l)	Income Tax including surcharge [Also indicate the assessment year upto which income I ax Return filed. Give also Permanent Account Number (PAN)]		-9/7/2
(ii)	Wealth I ax [Also indicate the assessment year upto which which wealth Tax return filed.]		/W/2
(111)	Sales Tax [Only in case of proposetary business]	**\/.***=-	~ 1 J ====
(T.21/2)	Property Tax.	X / V /_	N. A.

(4) My educational qualifications are as under (GIVE DETAILS OF SCHOOL AND UNIVERSITY EDUCATION)

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(Name of School / University and the year in which the course was completed should also be given)

GRAZULATE "NORTH EXENCIPLONIVERSITY

DEPONENT

VERIFICATION

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 and nothing material has been concealed therefrom.

Verified at Kenny 10 1/2 this the ____ day of U. ___, 200 /__

DEPONENT