

Receipt for deposit amount

(Prescribed by the State Election Commission)

3	Date 07/03/22
Received from Smt./Shri	Maik
Rs. 100 (Rupees Dr.s. H	tendred)
on account of security deposit for candidature for the Ward No Of Lairang put Municipali	e office of the * Councillor/Gerporator of
Place R.cuitzang.pum	Election to the Control of the Contr
* Strike out whichever is not applicable.	Election work of ficer
OGP—MP—DTP-U-2 (SEC) 48—3,000 Bks.—25-5-2018	Rairangpur Municipality

King y Koly W

03/09

FORM VIII

[See Rule 25 (1)]

Nomination Paper

 Name or number of the Ward for which the candidate is nominated (mention here whether the nomination is for a reserved seat, if any).

Ward No- 9

- 2. Full name of candidate
- 3. Number of candidate on the electoral roll.
- 4. Father's or husband's name
- 5. Age
- 6. Address
- 7. Community
- 8. Full name of the proposer
- Number of proposer on the electoral roll.
- 10. Signature of the proposer
- 11. Full name of the seconder
- Number of seconder on the Electoral roll.
- 13. Signature of the seconder
- Election symbol adopted by the candidate.

Guruba Nack -323 Booth No-13

Late Chasia Naik

42.

W. Not. Goar Colony, Rairangfour

S.T.(RALHO)

Smt - Parbati Naik

523 Ward No-9, Booth No13

Weto 18619166

Neto Naik

521 Ward Nog Bust No 13

LT.9 of Neto Naix

"HAND"

Candidate's Declaration

2HC party/l further dec	ge as required under rule 25 and I am willing have been sponsored for this election by the lare that I will stand for the election as an out necessary). For W.N 9 are want come in the standard of the candidate.
I further declare that I am qualified and also of the Odisha Municipal Act 1950 for being of Ray and I was MAC/Municipality/Municip	o not disqualified under any of the provisions chosen fill the seats in Ward No
	Signature of candidate
Endorsement by the Election Offic	
Serial number	Signature of the Election Officer or other authorised person Election Officer Rairangpur Municipality



Ranangpur





S). NO 20 dt. 07.02.2022 Ple pa her

AFFIDAVIT TO BE FILED BY THE CANDIDATE ALONGWITH NOMINATION PAPER TO THE ELECTION OFFICER /RETURNING OFFICER FOR ELECTION TO OFFICE OF	
Ward No of of NAC/Municipality/Municipal Corporation for the office of Councillor /Corporator/	
ORNAC/Municipality/Municipal Corporation for the office of Chairperson/Mayor	
(strike out whichever is not a fi	
I. Gurula Mauthson/daughter/wife of G. hand	
whichever is not applicable) (2) My name is enrolled in	h
(3) My contact telephone number(s) is/aicand my social media account(s) (if any) mail id (if any) is	
is/are	
(i). Me	

(4) Details of Permanent Account Number (PAN) and status of filing of $I_{\mathbf{n}_{\mathbf{c}_{\mathbf{o}_{\mathbf{n}_{\mathbf{q}}}}}}$ return:

retur	n:		G. on	cia Total income
Sl. No.	Names	PAN	year for which t	shown in Income Tax Returning. Rupees) for the last fire. Rupees) Financial Years completed (ax on 31 st March)
1.	Self Gamba Non	NO	No	(i) (ii) (iii)
				(iv) (v)
2.	Spouse Gebati-Naik	No	No	(i) (ii)
	Gobali New K			(iii) (iv) (v)
3.	HUF (If Candidate is Karta/Coparcener)			(i) (ii)
	No	No		(iii)
y*		,		(v)
4.	Dependent 1	No		ii)
				iii)
			(1	v)

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Acone a

5.	Dependent 0				
	Dependent 2	A 1		(i)	NY
		No	No	(ii)	rel
				(iii)	rel
				(iv)	Rel
	_			(v)	le
6.	Dependent 3		,	(i)	Ne
	,	M	\sim	(ii)	M
				(iii)	uel
				(iv)	rel
				(v)	NOY

Note: It is mandatory for PAN holder to mention PAN and in case of no PAN, it should be clearly stated "No PAN allotted".

(5) Pending criminal cases

(i) I declare that there is no pending criminal case against me.

(Tick this alternative if there is no criminal case pending against the Candidate and write NOT APPLICABLE against alternative (ii) below)

OR

(ii) The following criminal cases are pending against me:

(If there are pending criminal cases against the candidate, then tick this alternative and score off alternative (i) above, and give details of all pending cases in the Table below)

Table

(4)	FIR No. with name and address of Police Station concerned	No	Mo	Nu	
	, ,		,		

Granda Mois

b)	Case No. with Name of the Court	NoL	NiL	The same
(c)	Section(s) of concerned Acts/Codes involved (give no.of the Section, e.g. Sectionof IPC, etc.).	Nil		no (é
(d)	Brief description of offence	ne	ne	ni
(e)	Whether charges have been framed (mention YES or NO)	nie	aie	air
(f)	If answer against (e) above is YES, then give the date on which charges were framed	nie	nie	ai
(g)	Whether any Appeal/Application for revision has been filed against the proceedings (Mention YES or NO)	mi	nie	ail.

(6)Cases of conviction

(i) I declare that I have not been convicted for any criminal offence. (Tick this alternative, if the candidate has not been convicted and write NOT APPLICABLE against alternative (ii) below)

OR

(ii) I have been convicted for the offences mentioned below:

(If the candidate has been convicted, then tick this alternative and score off alternative

(i) above, and give details in the Table below)

Table

(a) Ca	ase No.	No (NiC	oric,
(b) Na	ame of the Court	N, C	Wil	Ni C
Acof	ections of cts/Codes involved (give no. f the Section, e.g. ection of IPC, etc.).	NIL	NiL	NIL

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			т		
d) E	Brief description of offence for				
7	which convicted	NT [Mil	Nil	
'-'	Dates of orders of conviction	Ni	· Nic	Ni	
(f)	Punishment imposed(indicate period of imprisonment awarded and/or quantum of the fine imposed)	M'C	Nic	Ni C	
(g)	Whether any Appeal has been filed against conviction order (Mention YES or No) Repeat the above sequence in respect of each separate case of conviction.	N,'L	Nic	N,'L,	
(h)	If answer to (g) above is YES, give details and present status of appeal	Wil	NiL	Ni C	
(i)	Discharged /acquitted in the cases(s) Section of the Act and description of the offence	Wil	N₁. C	N.L.	
(i)	The Court Which had taken cognizance	N:C	N; C	Nil	
(k)	Case No	Wil	NiL	N'C	
(1)	Details of Appeal/application for revision etc. if any filed against above order taking cognizance	• 1	Ni`[Ni C	
(m)	Cases(s) is/ are pending against me which cognizance has been taken by Court Section Act and Description of the offence for which cognizance	of ~; L	NiL	Ni C	
(n)	The Court Which had take	en McC	Nil	Mi L	
(0)	Case No	WIL	NoL	N; L	
		5	^		

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(p) Details of Appeal/application for revision etc. if any filed against above order taking cognizance		Nil
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1. Details should be given in reverse chronological order, i.e., the latest cases

2. Additional sheet may be added if required.

(7) That I give herein below the details of the assets (movable and immovable etc.) of tq. spouse and all dependents:

A. Details of movable assets:

Note: 1. Assets in joint name indicating the extent of joint ownership will also have to be

Note: 2. In case of deposit/Investment, the details including Serial Number, Amount, deposit, the scheme, Name of Bank/Institution and Branch are to be given.

Note: 3. Value of Bonds/Share Debentures as per the current market value in Stock Exchirespect of listed companies and as per books in case of non-listed companies be given.

Note: 4. 'Dependent' means parents, son(s), daughter(s) of the candidate or spouse and an person related to the candidate whether by blood or marriage, who have no means of income and who are dependent on the candidate for their livelihood.

Note: 5. Details including amount is to be given separately in respect of each investment

Note: 6. Details should include the interest in or ownership.

Explanation,- For the purpose of this Form, the expression" includes, detail of all deposits or investments;

S. No.	Description	Self	Spouse	HUF	Dependent -1	Dependent -2	D
(i)	Cash in hand	NIC	NiL	Nic	Wi C	MIC	-

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ii)	Details of deposit in Bank accounts (FDRs, Term Deposits and all other types of deposits including saving accounts), Deposits with Financial Institutions, Post Office/Current Accounts, Non-Banking Financial Companies and Cooperative societies and the amount in each such deposit	Nit	MiL	NiL	rv,`L	ML	1V)' L
(iii)	Details of investment in Bonds, Debentures/Shares and units in companies/Mutual Funds and others and the amount.	Pibl	ml	wil	nit	ml	mì
(iv)	Details of investment in NSS, Postal Saving, Insurance Policies and investment in any Financial instruments in Post office or Insurance Company and the amount	mi	ni	ni	nil	nil	oul
(v)	Personal loans/advance given to any person or entity including firm, company, Trust etc. and other receivables from debtors and the amount.	me	ail	ml	nie	ant	nie
(vi)	Motor Vehicles such as	ml	ail	wt	nil	nt	mil
(vii)	Jewellery, Gold, Gold Ornaments Silver and Silver Ornaments valuable thing(s) (give details of weight and value) with approx. present market value according to you	art	nil	mil	nil	nd	nit
(viii)	Any other assets such as value of claims/interest	nil	nIl	ne	nil	mi	
(ix)	Gross Total value	ari	ail	at	art	nil	mi
1							/

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(8) Details of Immovable assets:

Note: 1. Properties in joint ownership indicating the extent of joint ownership will

have to be indicated

Note: 2. Each land or building or apartment should be mentioned separately in this is

elc.

	ote: 3. Details should include t					This fon	1
S1. No	Description	Self	Spouse	HUF	Dependent-1	Dependent-2	(1)
(i)	Agricultural Land Location(s) Survey number(s)	Nai	ari	ni	ari	ai	
	Area (total measurement in acres)	Min	a	nie	m	air	
	Whether inherited property (Yes or No)	nit	ail	ml	we	al,	
	Date of purchase in case of self - acquired property	ail	ail	nie	art	ari	
(ii)	Cost of Land (in case of purchase) at the time of purchase	ail	nil	nil	nie	and	
	Any Investment on the land by way of development, construction etc.	nil	nie	nil	ar	arl	
	Approximate Current market value	nil	ail	ml	are	art	
	Non-Agricultural Land Location(s) Survey number(s)	nit	ail	nil	ail	ail.	
	Area (total measurement in sq. ft.)	and	2 mil	arl	nil	ail	
	Whether inherited property (Yes or No)	ail	are	arl	ail	art	
	Date of purchase in case of self - acquired property	ni	e are	ail	arl	and a	
	Cost of Land (in case of purchase) at the time of purchase	1		ail		me	

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	Any Investment on the land by way of development, construction etc.	ani	mè	nit	m	m	al'
	Approximate current market value	ant	arl	and	mil	me	ani
(iii)	Commercial Buildings) 		
	(including apartments) -Location(s) -Survey number(s)	ail	mt	ml	nl	art	and
	Area (total measurement in sq. ft.)	mit	nil	url	are	and	and
	Built-up Area (total measurement in sq.ft.)	and	ru	arl	me	arl	and
	Whether inherited property (Yes or No)	ne	ail	arl	ail	mil	ai
	Date of purchase in case of self - acquired property	are	nit	arl	nie	arl	ant
	Cost of property (in case of purchase) at the time of purchase	art	ail	art	ate	ane	mi
	Any Investment on the property by way of development, construction etc.	aie	mi	ait	are	ail	mi
	Approximate current market value	mil	ai	nil	are	ail	arl
(iv)	Residential Buildings (including apartments): -Location (s) -Survey number(s)	ml	ail	nil	ail	ant	ail
	Area (Total measurement in sq. ft)	nit	nil	ail	al	are	are
	Built up Area (Total measurement in sq. ft.)	ail	nil	ail	nel	me	unt
	Whether inherited property (Yes or No)	aid	l mil	arl	ant	ail	and
	Date of purchase in case of self – acquired property	me	mil	ail	ail	me	uil

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(9) Give herein below the details of liabilities/dues to public financial institutions and government:-

> (Note: Please give separate details of name of bank, institution, entity or individual and amount before each item)

	Donath an	Self	Spouse	HUF	Dependent-	Dependent-2	Depen
5.	Description	Sen	Spouse	200	•	_	
No. (i)	Loan or dues to Bank/Financial Institution(s)	nie	mil	nie	art	ail	
	Name of Bank or Financial Institution, Amount outstanding, Nature of loan						
	Loan or dues to any other individuals/ entity other than mentioned above.	nt	nil	ail	ail	ail	
	Name(s), Amount outstanding, nature of loan					ģ.	
	Any other liability	ouil	and	ail	ail	ari	
	Grand total of liabilities	art	ant	nil	ail	mit	

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(10) Details of profession or occupation:
(b) Spouse form
(10A) Details of source(s) of income: (a) Self
(C) Source of income, if any, of dependents,
(10B) Contracts with appropriate Government and any public company or companies
(a)details of contracts entered by the candidate
(b) details of contracts entered into by spouse
(c) details of contracts entered into by dependents
(d) details of contracts entered into by Hindu Undivided Family or trust in which the candidate or spouse or dependents have interest
(e) details of contracts, entered into by Partnership Firms in which candidate or spouse or dependents are partners
(f) details of contracts, entered into by private companies in which candidate or spouse or dependents have share $\wedge \wedge \circ$
at (11). My educational qualification is as under
(11). My educational qualification is as under: Read who be Clan VIII
(Give details of highest School / University education mentioning the full form of the certificate/diploma/ degree course, name of the School /College/ University and the year in which the course was completed.)
VERIFICATION
I, the deponent, above named, do hereby verify and declare that the contents of this affidavit are true and correct to the best of my knowledge and belief and no part of it is false and nothing material has been concealed there from. I further declare that: (a) there is no case of conviction or pending case against me other than those mentioned in items 5 and 6 of Part A and B above; (b) I, my spouse, or my dependents do not have any asset or liability, other than those mentioned in items 7 and 8, 9 above.
Verified at Donneyforg this the haday of Morch 2027
Witnesses:
1. Any marks of marker do hereter that the Deponent of the the Sold And And And And And And And And And An
- 10 - 10 - 10 - 10 - 10 - 10 - 10 - 10

MOTARY FAL

Note: 1. Affidavit should be filed latest by 3.00 PM on the last day of filing nominations

Note: 2. Affidavit should be sworn before an Oath Commissioner or Magistrate of the First Clark

Note: 3. All columns should be filled up and no column to be left blank. If there is information to furnish in respect of any item, either "Nil" or "Not applicable", as the case may be, should be mentioned.

Note: 4. The affidavit should be either typed or written legibly and neatly.

Note: 5. Each page of the Affidavit should be signed by the deponent and the Affidavit should bear on each page the stamp of the Notary or Oath Commissioner or Magistrate of the First Class or Executive Magistrate before whom the Affidavit is sworn.

Garreba Noix

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E). NO - 21 dt. 07.03.2022 BEFORE THE NOTAKE

AFFIDAVIT

At: Commence Colony, W/No. 9. Po/Ps. Downsplan Dist- Mayurbhanj, Odisha,

- 1. I am an elector in ward No ... ??.... of the Rairangpur Municipality.
- 2. I am not less than 21 years of age on the date of publication of preliminary Electroral
- 3. I am able to read and write either English, Hindi or Odia.
- 4. I have not more than one spouse living.
- 5. I have not more than two children (except more than two children before 30.05.1995).
- 6. I have not been removed during the term of her /his office as the chairperson or the Vice Chairperson of the Municipality immediately preceding the election.
- 7. I have not been adjudge by a competent court to be of unsound mind.
- 8. I am not an undischarged insolvent.
- 9. I have not any arrear or any dues payable to Municipality .
- 10. I am not interested in a subsisting contract, either directly or indirectly.
- 11. I am not employed as a paid legal practitioner on behalf of the Rairangpur Municipality.
- 12. I am not a Government servant either whole time or part-time.
- 13. I have not been convicted or fount to have been guilty of offence of corrupt or illegal practice relating to election.
- 14. I does not possess any other disqualification as mentioned in Section 16 of the O.M. Act 1950.

VERIFICATION

The averments made in this affidavit are true to the best of my knowledge and belief and I put my Signature in this verification on this the...... day of March,2022 at Rairangpur Court premises.

he deponent being identified by

Deponent Sold

Form X [Sca Rule 25 Note 1 & 43 (3)] Notice as to names of candidates sponsored by the political party

To

The Election Officer Lange Beng. Municipality

Council- Sponsoring of candidates.

Sir,

In pursuance of Rule 25 (8) of the Odisha Municipal (Delimitation of Wards. Reservation of Seats and Conduct of Election) Rules. 1994, I hereby give notice that the following person has been sponsored by Indian National Congress Party as its candidate Council.

SI. No.	Name of the Municipality	Name of the approved candidate	Father's / Husband's name of approved candidate	Postal address of approved candidate
	Rainingpor	GenzebaNæik	Shacia Nocik	vill-W-No.05 Governa Colony Recinangeloss Popps. Recinangen

Yours faithfully ,

(Niranjan Pathaik)

(Name and signature of the President

or Secretary of the State Level Organisation of the Political Party or of the Office Bearer authorised in Form IX by the Political Party.)

> President Odiałna Przedech Congress Committe (Seal of the Party)

N.B.- (1) This must be delivered to Election Officer at least one day before the date fixed for scrutiny of nomination papers.

(2) Form must be signed in ink by office bearer(s) mentioned above. No facsimile

signature or signature by means of rubber stamp, etc. shall be accepted.

(3) No form transmitted by Fax shall be accepted.