

ఆండ్రప్రవేశ్ आंध्र प्रदेश ANDHRA PRADESH	25AA 945086
51 No 5015 26-03-2009 Re 10-00 , wakens	Laco
Purchase Nam Sala, Marhender S 10 (27)	K. NARSAJAH
SI No SOIS De 26-03-2009 Rg 10-00 Purchaser Na Am Sala: Manhender Sto Yarkeros For Whom Selfon Bellom Palli	MANCHERIAL
FORM 26 (SEE RULE 4A)	
Affidavit to be furnished by the candidate before the Returning of	fficer for election to
Parlame of the house) from	Deddapali
Constituency (name of the constituency)	,
I, Ambala Mah under son/daughter/wife of Y.	ckoob.
Aged about 38 Years, resident of Beyern AMD	Candidate at the
above election, do hereby solemnly affirm/state on oath as under:	
1. I am / am not accused of any offence(s) punishable with im	nprisonment for two
years or more in a pending case(s) in which a charge(s) has	s/have been framed
by the court(s) of competent jurisdiction.	
If the deponent is accused of any such offence(s) he shall fur	rnish the following
information:	
alot applicable.	
(i) Case/First information reports No./Nos	
(iii) Police-station(s)	State (s)
(=(D.)=) Kerawkajalah	3
	COV S. No. B

(iii) Section(s) of the concerne	ed Act(s) and short description of the offence(s) for peer charged
(iv) Court(s)-which framed the	e charge(s) Not applicable
(v) Date(s) on which the char	ge(s) Not applicable
(vi) Whether all or any of the	proceeding(s) have been stayed by any court(s) of
competent jurisdiction	real applicable
referred to in sub-section	n convicted of an offence(s0 [other than any offences) (1) or sub-section (2), or covered in sub-section(3), of ntation of the People Act, 1951 (43 of 1951)] and at for one year or more.
If the deponent is convicted and information:	punished as aforesaid, he shall furnish the following
(i) Case/First information re (ii) Court(s) which punished. (iii) Police station(s) Addition	ports No./Nos a ot epplicable a lot of plocable Splowed District(s) State(s)
(iv) Date(s) on which the sente	ence(s) was/were pronounced Not Palicable.
(v) Whether the sentence(s) h	nas/have been stayed by any court(s) of competent
and the second s	
0000100	- Mayor L
Place: Date	Signature of Deponent
	VERIFICATION
	hereby verify and declare that the contents of this he best of my knowledge and belief, no part of it is en concealed therein.
Verified at Haulund th	his 28 lb. day of May and 200. g
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	Magratha Paper Ganes Repared Mannet RIAL 50

S.No. L. Dale 28103/09



SI. No. 50 17 m. 26-03-2009 TCs 10-10 yalo-oob

Purchaser Name Ambala Mahendar Sho yalo-oob

For Whom Self Ro Beller mfally

K. NARSAIAH STAMP VENDOR MANCHERIAL

ANNEXURE - I AFFIDAVIT BE FURNISHED BY CANDIDATE ALONGWITH NOMINATION PAPER

	Before the Returning Officer
	For election to (name of the House)
7.66	From Dedapath partament constituency
1	(Name of the Constituency)
IA.m	of sola Mishendar son/daughter/wife of
196 1969 - 1964 - 1966	Yakoob aged 35 years resident of
NO. 2	Yakoob aged 25 years resident of Doction Rad Sportful Page 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:-

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- (i) Section of the Act and description of the offence for which cognizance taken.
- (ii) The Court which has taken cognizance or lot Apply Calotes
- (iii) Case No:

NOT APPLICABLE

(iv) Date of order of the Court taking cognizance:

orof Applicable

(v) Details of appeal(s) / application(s) for revision, etc., if any, filed against above order taking cognizance.

(2) That I give herein below the details of the assets (immovable, movable, bank balance, etc) of spouse, my dependents and myself

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)	Dependent-	Dependent-	Dependent-
				Name (s)	1 Name	2 Name	3 etc. Name
	(i)	Cash	are	Surviv	Alle		
	(ii)	Deposits in					
	:	Bank Financial				,	
		institutions and	Lech	all	MCL	all	
		Non-Banking	W.C.				
, :		Financial			,		
	•	Companies				·	
Ì	(iii)	Bonds,					
		Debentures and	ALER-	NUL	nerc	NUL	
		Shares in		, , ,		v	
		companies					
	(iv)	Other financial					
		instruments,			Alv.	alet.	
-		NSS, Postal	alil	WVC.	ni () C.	· #L. ^ · .	
٠		Savings, LIC					
		Policies. Etc.					
	(v)	Motor Vehicles			1 (
	• • •	(details of	NU	all	rle(Mile	
		make)					
	(vi)	Jewellery (give					
1		details of	nect.	AH.L	JU.	Nu	
		weight and	War.	N. r	NUL.		
		value)					
1	(vii)	Other assets,					
-		such as values	NUL	alk	NIL	ML	
٠	·.	of	v 19—	W. 0		10 -	
		claims/interests	AT	Treatment of			



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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 dependent on the income of the candidate.

B. DETAILS OF MOVABLE 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- 1 Name	Dependent- 2 Name	Dependent- 3 etc. Name
(i)	Agricultural land location(s)- Survey number(s) - Extent (Total measurement)-Current market	Rile	nice	MIL	all	
(ii)	value Non-Agricultural land-Location(s) - Survey number(s)- Extent (Total measurement)- Current market value	NU	neil	NU	NIL	
(iii)	Buildings (commercial and residential)- Locations(s)- Survey/door number(s) Extent (Total measurement)- Current market value	NU.	NUL	nil.	all	
(iv)	Houses/Apartments, etcLocation(s)- Survey/door number(s)-Extent (Total measurement)- Current market		NIK	NUL	NIL	

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	value		
(v)	Others (such as interest in property)	nl	Me Nu

3. I give herein below the details of my liabilities/overdue to public financial institutions and Government dues:

(Note: Please give separate details for each item)

S. No	Description		Name & address of Bank/Financial institution (s)/Department(s)	Amount outstanding as on		
(a)	(i) Loans	s from Banks	Nil	ALLLO		
	(ii) Loan	s from financial				
		ernment dues	NUL	NIL		
	a)	Dues to departments dealing with government accommodation	MIL			
	b)	Dues to departments dealing with supply of water	NiL			

	c)	Dues to			
		departments			
		dealing with			
		supply of			
		electricity.			
	d)	Dues to			
	,	departments			
		dealing with	NAAA		
The second	100,000	telephones.	NUL		
	e)	Due to			
		departments			
		dealing with			
		government			
2 A		transport	AS OF STATE		
		(including aircrafts		1	

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	f)	and helicopters) Other dues, if any		
S. No		Description	Name & address of Bank/Financial Institutions(s)/D epartment(s)	Amount outstanding as on
(b)	(i)	Income Tax including surcharge [Also indicate the assessment year upto which Income Tax Return filed. Gove also Permanent Account Number (PAN)]	peil	
	(ii)	Wealth Tax [Also indicate the assessment year upto which Wealth Tax return filed]	Nill	
	(iii)	Sales Tax [Only in case of proprietary business]	rkit-	
	(iv)	Property Tax	N(L	

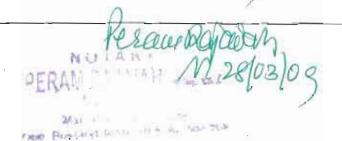
(4) My educational qualifications are as under:

(GIVE DETAILS OF SCHOOL AND UNIVERSITY EDUCATION)

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

DEPONENT

Perawapy



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, no part of it is false and nothing material has been concealed there from.

Verified at Manch und this the 28th day of M. with 2009

DEPONENT

ATTESTED





S.No. 18 Lipate: 28 03 09