

BAQUAR HUSSAM STAMP VENDOR BODHAN

FORM 26 (SEE RULE 4A)

Affidavil to be furnished by the candidate before the Returning Officer for emetion to Parliament (name of the House) from Nizamabad constituency (name of the constituency)

I, Surya Sujatha, 13/0: Surya Shyam Kao, Aged about: 43 years, resident of Half candidate at the above election, do hereby solumnly affirmustate at all as under:

1. I anythe not occused 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.

NOTARY
Appointed by Gove of A.F.,
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If the deponent is accused of any such offence(s) he shall furnish the
following information: (i) Case/First information.reports 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 which the candidate has been charged
(iv) Which framed the charge(s)
(v) Date(s) on which the charge(s)
(vi) whether all or any of the proceeding(s) have been stayed by any court(s) of competent jurisdiction
2. I have been share not been convicted of an offence(s) [other than any offences[referred to in sub-section (1) or sub-section(2), or covered in sub-section(3), of section 8 of the Representation of the People Act, 1951 (43 of 1951) and sentenced to imprisonment for one year or more.
If the deponent is convicted and punished as aforesaid, he shall furnish the following information:
(i) Case/First information reports No./Nos
(ii) counts(s) which punished
State(s)
(iv) Section(s) of the concerned Aci(s) and short description of the offence(s)
for which the candidate has been charged
(v) Date(s) on which the charge(s)
(vi) Whether the sentence(s) has/have been stayed by any court(s) if competent jurisdiction
Place Bodhan Usle 38/03/09 Signature or deponent
VERIFICATION
I, the above-named deponent, do herby 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 <u>BODFIAN</u> this <u>28th</u> day of <u>MARCH</u> , 2009.
Signature of deponent
Note: "The column in this from which are not applicable to the deponent may be struck off."
G. Shyam Rao
Advocate in lary Serorn and Signed before me this
Appointed to Givi. Of A D Town of MOLL 2005
B. N. BODHAN NOTARY
Phone: 12 12564 Dist Nizamabad Appointed by Govt. of A
BOOHAN.



ANDHRA PRADESH Name of Purphaser, S-Swieth STAMP VENDOR BODHAN PAPER To Whom is dued: Before the Returning Officer for election to Parliament (name of the House) from Nizamabad Constituency (name of the constituency) l, Surya Sujatha, D/o: Surya Shyam Rau, Aged 43 years, resident of Belial candidate at the above election, do hereby solemnly affirm and state on ฟื้อสร้า คร จะเอียม of Strike out which ever not applicable j The following case(s) is/are pending against me in which cognizance has been taken by the court. Section of the Act and description of the offence for which (1) cognizance takens The Court which has taken cognizance (11) 211 (211) Case No. Dute of order of the Court taking cognizance 1 Details of appeal(s)/application(s) for revision, etc., if any. (w) filed against above order 1. NOS/ Receipt NOS 06-06

G. Shyam Roo Appointed by Court. of A.P. BODHEN. Phone: (R) 72564

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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	NIL	MIL		-	~
(ii)	Deposits in Banks, Financial Institutions and Non-Banking Financial Companies	NIL		_	4-	
(iii)	Bonds, Debentures and Shares in companies	NIL	_	_	<u>د</u>	et ma
(iv)	Other financial instruments, NSS, Postal Savings, LIC Policies, etc.	NIL	_	_	-	
(v)	Motor Vehicles (details of make, etc.)	NIL				
(Vi)	Jewellery (give details of weight and value)	90gms Gold				
(∨ii)	Other assets, such as values of claims / interests	10				

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.

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^{*}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-1 Name	Dependent-2 Name	Dependent-3 etc. Name
(i)	Agricultural Land - Location(s) - Survey number(s) - Extent (Total measurement) - Current market value	No				
(ii)	Non-Agricultural Land - Location(s) - SUIVQY NUMBOI(s) - Extent (Total measurement) - Current market value	No				
(iii)	Buildings (commercial and residential) - Location(s) - Survey / door number(s) - Extent (Total measurement) - Current market value	No				
CATS SOLUTION SERVICE	Houses / Apartments, etc. Location(s) Survey / door number(s) Extent (Total measurement) Current market value	Νο.				
(v)	Officers (such as interest in property)	NO				



(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 & address of Bank / Financial Institution(s) / Department(s)	Amount ouistanding as on	
(a)	(i)	Loans from Banks	25000/- Andhio Bank	about 4000/-	
	(ii)	Loans from financial institutions	-	-	
	(iii)	Government dues	_		
	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			
	e)	Dues to departments dealing with government transport (including aircrafts and helicopters)			
	f)	Other dues, if any	NO		



S	.No.	Description .		Name & address of Bank / Financial Institution(s) / Department(s)	Amount outstanding as on	
(t	D)	(i)	Income Tax Including surcharge [Also indicate the assessment year upto which Income Tax Return filed. Give also Permanent Account Number (PAN)]	NO		
		(ii)	Wealth Tax [Also indicate the assessment year upto which Wealth Tax return filed.]	No	-	
		(iii)	Sales Tax [Only in case of proprietary business]	No		
		(iv)	Property Tax	No		

(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.)

Publica 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 Attach this the A25 day of Mask 2005

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