

2020 PM  
20-12-2020  
20-12-2020  
20-12-2020

ପାରମ ସଂଖ୍ୟା-4

[ ନିୟମ 12 (10) ଦ୍ରଷ୍ଟବ୍ୟ ]

ମନୋନୟନ ପତ୍ର



ଜିଲ୍ଲାର ଜିଲ୍ଲା ପରିଷଦ ନିମନ୍ତେ ନିର୍ବାଚନ ।

ମୁଁ ଜିଲ୍ଲା ପରିଷଦ ନିର୍ବାଚନ ନିମନ୍ତେ ..... କାଶିସ୍ୱର "କ" ..... ଜିଲ୍ଲା ପରିଷଦ ନିର୍ବାଚନ ମଣ୍ଡଳୀରୁ ନିମ୍ନଲିଖିତ

ବ୍ୟକ୍ତିଙ୍କୁ ପ୍ରାର୍ଥୀ ଭାବରେ ମନୋନୀତ କରୁଅଛି ।

ପ୍ରାର୍ଥୀଙ୍କ ନାମ ..... ଅମି ମାହି

ପିତା/ପତିଙ୍କ ନାମ ..... ଦିପକ ମାହି

ତାଙ୍କର ଭାବ ଠିକଣା ଗ୍ରାମ- ଭୁମୁରମୋଡ଼ି ଗୋଳା- ଚନ୍ଦ୍ରଗିରି ଥାନା- କାଶିସ୍ୱର ଜିଲ୍ଲା- ଓଡ଼ିଶା

..... କାଶିସ୍ୱର "କ" ..... ପରିଷଦ ନିର୍ବାଚନ ମଣ୍ଡଳୀର ଭୋଟର ତାଲିକାରେ ତାଙ୍କ ନାମ ଦରଜ ହୋଇଥିବା

କ୍ରମିକ ସଂଖ୍ୟା ୩୫୧, ଗ୍ରା.ପ. ଚନ୍ଦ୍ରଗିରି, ବ୍ଲକ୍ ନଂ - ୩

ମୋର ନାମ ..... କାଳିଆ ମାହି ଏବଂ ..... କାଶିସ୍ୱର "କ"

ପରିଷଦ ନିର୍ବାଚନ ମଣ୍ଡଳୀର ଭୋଟର ତାଲିକାର କ୍ରମିକ ସଂଖ୍ୟା ୩୫୧, ଗ୍ରା.ପ. ଚନ୍ଦ୍ରଗିରି, ବ୍ଲକ୍ ନଂ - ୩ ରେ ତାହା

ଦରଜ କରାହୋଇଅଛି ।

ତାରିଖ ..... ୨୦-୦୧-୨୦୨୨

Kalia Mahi  
ପ୍ରସ୍ତାବକଙ୍କ ସ୍ୱାକ୍ଷର

ମୋର ନାମ ..... କାଶିସ୍ୱର "କ" ଏବଂ ..... କାଶିସ୍ୱର "କ"

ପରିଷଦ ନିର୍ବାଚନ ମଣ୍ଡଳୀର ଭୋଟର ତାଲିକାର କ୍ରମିକ ସଂଖ୍ୟା ୧୮୪, ଗ୍ରା.ପ. ଚନ୍ଦ୍ରଗିରି, ବ୍ଲକ୍ ନଂ - ୪ ରେ ତାହା

ହୋଇଅଛି ।

ତାରିଖ ..... ୨୦-୦୧-୨୦୨୨

Kshirod Mahi  
ସମର୍ଥକଙ୍କ ସ୍ୱାକ୍ଷର

ମୁଁ ଉପର ମନୋନୀତ ପ୍ରାର୍ଥୀ ମନୋନୟନ ପ୍ରତି ସମ୍ମତି ଜଣାଉଛି ଏବଂ ଏତଦ୍ୱାରା ଘୋଷଣା କରୁଅଛି ଯେ-

(କ) ମୋର ବୟସ ..... ୨୪ ..... ବର୍ଷ ସଂପୂର୍ଣ୍ଣ ହୋଇଅଛି ।

\* (ଖ) ମୁଁ ..... ଦିଲ୍ଲୁ ଜନେ ..... ଦଳଦ୍ୱାରା ଏହି ନିର୍ବାଚନରେ ଛିଡା ହୋଇଛି ।

(ଗ) ପସନ୍ଦ ହେଉଥିବା ସଂକେତ, ପସନ୍ଦ କ୍ରମରେ (i) ..... ଶିଳା

(ii) ..... ଏବଂ (iii) .....

ବିଦ୍ୟା

(କ) ମୋର ଏବଂ ମୋର ପିତା/ପତିଙ୍କର ନାମ ଉପରେ ..... (ଭାଷାର ନାମ) ଠିକ୍ ଭାବରେ ବନାନ କରାଯାଇଛି ।

(ଖ) ମୋର ଜ୍ଞାନ ଓ ବିଶ୍ୱାସ ଅନୁଯାୟୀ ମୁଁ ପ୍ରାର୍ଥା ହେବା ପାଇଁ ଯୋଗ୍ୟ ଏବଂ ଯଦି ମୋତେ ..... କାମିସ୍ତ୍ରୁ (କ) ..... ଜିଲ୍ଲାର ଜିଲ୍ଲା ପରିଷଦର ଆସନ ପୂରଣ ନିମନ୍ତେ ପସନ୍ଦ କରାଯାଏ ତେବେ ମୁଁ ଅଯୋଗ୍ୟ ନୁହେଁ ।

ପୁନଶ୍ଚ ମୁଁ ଘୋଷଣା କରୁଅଛି ଯେ ମୁଁ ..... କମି (ଧାଦିବାଣୀ) .....

\*\*ଜାତି/ଜନଜାତିର ସଦସ୍ୟ ଯାହାକି ଓଡ଼ିଶା ରାଜ୍ୟର ଅନୁସୂଚିତ ଜାତି/ଅନୁସୂଚିତ ଜନଜାତି/ପଛଆବର୍ଗ ନାଗରିକ ଅଟେ ।

ତାରିଖ ..... ୨୦-୦୧-୨୦୨୨

ଆମି ମାୟି  
Ami mayni  
ପ୍ରାର୍ଥୀଙ୍କ ସ୍ୱାକ୍ଷର

\* ପ୍ରଯୋଜ୍ୟ ହେଉନଥିବା ପାରାକୁ କାଟି ଦିଅନ୍ତୁ ।

\*\* ପ୍ରଯୋଜ୍ୟ ହେଉନଥିବା ଶବ୍ଦକୁ କାଟି ଦିଅନ୍ତୁ ।

(ନିର୍ବାଚନ ଅଧିକାରୀଙ୍କଦ୍ୱାରା ପୂରଣ କାରି)

ମନୋନୟନ ପତ୍ର କ୍ରମିକ ସଂଖ୍ୟା ..... ୦୨

ଏହି ମନୋନୟନ ପତ୍ର ମୋତେ ମୋର କାର୍ଯ୍ୟାଳୟରେ ..... ୨୦: ୦୧: ୨୦୨୨

ତାରିଖରେ ..... ୨: ୫୦ p.m ..... ସମୟରେ ପ୍ରାର୍ଥୀ/ପ୍ରସ୍ତାବକଙ୍କ ଦ୍ୱାରା ଦିଆଗଲା ।

ତାରିଖ ..... ୨୦/୧/୨୨

୨୦/୧/୨୦୨୨  
ନିର୍ବାଚନ ଅଧିକାରୀ  
କର୍ମୀ  
ଉପନିର୍ବାଚନ ଅଧିକାରୀ  
ଭାରତ

ନିର୍ବାଚନ ଅଧିକାରୀଙ୍କର ମନୋନୟନ ପତ୍ର ମଞ୍ଜୁର କରିବା ବା ନାମଞ୍ଜୁର କରିବା ନିଷ୍ପତ୍ତି

ମୁଁ ଓଡ଼ିଶା ଜିଲ୍ଲା ପରିଷଦ ଅଧିନିୟମ, 1991ର ବ୍ୟବସ୍ଥା ଅନୁସାରେ ଏବଂ ତଦଧୀନ ପ୍ରଣୀତ ନିୟମାବଳୀ ଅନୁଯାୟୀ ଏହି ମନୋନୟନ ପତ୍ରଟିକୁ ପରୀକ୍ଷା କରି ଦେଖୁଅଛି ଏବଂ ନିମ୍ନମତେ ନିଷ୍ପତ୍ତି କରୁଅଛି :-

\*ମନୋନୟନ ପତ୍ର ଗ୍ରାହ୍ୟ/ଅଗ୍ରାହ୍ୟ



भारतीय गैर न्यायिक

पाँच रुपये

FIVE RUPEES



सत्यमेव जयते

रु.5

RS.5

भारत INDIA

INDIA NON JUDICIAL



ଓଡ଼ିଶା ଆଇशा ODISHA

(BEFORE THE EXECUTIVE MAGISTRATE: NOTARY PUBLIC, RAYAGADA)

17AA 352832

ANNEXURE - I

FORMAT OF AFFIDAVIT

(To be submitted by candidate to the Election Officer/Returning Officer as an accompaniment to the Nomination Paper)

- For election to the office of Panchayat- Sarapanch / Samiti / Member of .....  
..... G.P. in ..... Block of Rayagada District/Member of  
..... Panchayat Samiti. of ..... District/Member of Kasipur 'A' Zilla  
Parishad of .... Rayagada District / Corporator of ..... Municipal Corporation  
of ..... District/Councilor of ..... Municipality/N.A.C of ..... District.
- (Please strike off the ones not applicable to you)

I Son Ami Majhi ..... Aged about 25 years, Son/Daughter/wife of  
Tapan Majhi ..... resident of village: Bhramaryodipo: Chandragiri  
PS: Kasipur ..... District: Rayagada, Odisha candidates at the above election, do hereby  
solemnly affirm and state on oath as under:-

**\*\*1. (A) I have in the past been convicted of Criminal Offence in the following case(s) and the** NIL  
**Detailed are as under:-**

- Case No.: .....
  - Selection of the Act and description of the offence for which convicted: .....
  - Date of conviction .....
  - Court by which convicted .....
  - Punishment imposed (Indicate period of imprisonment awarded and/or quantum of the fine imposed) .....
  - Detail of appeal/revision etc. against conviction .....
- (Repeat the above sequence in respect of each separate case of conviction)

NO: 787  
DATE: 201122  
TIME: 1:40 PM

  
Braja Sundar Nayak  
NOTARY, Rayagada-Odisha

Ami Majhi  
**DEPONENT**

Contd..P/02..



ଓଡ଼ିଶା ଆଠିଶା ODISHA

Page //02//

17AA 352837

- (B) That I have in the past been discharged/acquitted in the following case(s): NIL
- ~~Section of the Act and description of the offence with which charged~~  
.....
  - ~~The Court which had taken cognizance~~ .....
  - ~~Case No.:~~ .....
  - ~~Details of appeal/application for revision etc. if any, filed against above order taking cognizance~~ .....

(Repeat the above sequence in respect of each separate case of discharge/acquittal)

- (C) The following Case(s) is/are pending against me in which cognizance has been taken by the Court: NIL
- ~~Section of the Act and description of the offence for which cognizance taken~~  
.....
  - ~~The court which has taken cognizance~~ .....
  - ~~Case No.:~~ .....
  - ~~Details of appeal/application for revision etc. if any, filed against above order taking cognizance~~ .....

(Repeat the above sequence in respect of each separate case of discharge/acquittal)

\*\* If information against any of the columns at (A)/(B)/(C) is nil, state NIL, against the corresponding column and strike off the sub-columns below:

NO: 787  
DATE: 20/11/22  
TIME: 1:40h

  
Braja Sundar Nayak  
NOTARY Rayagada-Orisha

Ami meghi  
DEPONENT

Contd... P/03..

2. That, I/my spouse/my dependants\*\*\* own the following immovable properties:-

Agricultural Land(s)	Location	Area	Approx. present Market Value according to you
Self Name	NIL	NIL	NIL
Spouse (Give name)	NIL	NIL	NIL
Dependant son(s) (Give name(s))	NIL	NIL	NIL
Dependant daughter(s) (Give name(s))	NIL	NIL	NIL
Dependant (others) (Give name)	NIL	NIL	NIL
In Joint name(s) (Give names)	NIL	NIL	NIL

(B)

Urban Land(s)	Location	Area	Approx. present Market Value according to you
Self Name	NIL	NIL	NIL
Spouse (Give name)	NIL	NIL	NIL
Dependant son(s) (Give name(s))	NIL	NIL	NIL
Dependant daughter(s) (Give name(s))	NIL	NIL	NIL
Dependant (others) (Give name & relationship)	NIL	NIL	NIL
In Joint name(s) (Give names)	NIL	NIL	NIL

\*\*\*Dependant means a person wholly dependent on the income of the candidate

NO: 787  
DATE: 20/11/22  
TIME: 1:40 PM

Braja Sundar Nayak  
NOTARY, Raygada-Odisha

Ami Magni  
DEPONENT

Contd... P/04..

3. (A) That, I/my spouse/my dependants\*\*\* own the following movable property:

Self Name	Motor vehicle description such as Car, Jeep, Truck, Bus	Approx. present market value according to you	Gold & gold ornament; other precious stone(s) (in tolas/grams/carat)	Approx. present market value according to you	Silver & silver ornament; (in Tolas/Grams/Carat)	Approx. present market value according to you
	NIL	NIL	1 Tola	50,000/-	NIL	NIL
Spouse Name (Give name) Tapan Mohan	Bike	40,000/-	NIL	NIL	NIL	NIL
Dependant son(s) (Give name(s))	NIL	NIL	NIL	NIL	NIL	NIL
Dependant daughter(s) (Give name(s))	NIL	NIL	NIL	NIL	NIL	NIL
Dependant (others) (Give names)	NIL	NIL	NIL	NIL	NIL	NIL
In Joint name(s) (Give names)	NIL	NIL	NIL	NIL	NIL	NIL

3. (B) That, I/my spouse/my dependants \*\*\* own the following Bank balance/deposits:

Self Name	Name of the Bank	Amount in Fixed Deposit	Name of the Bank/Post office	Amount in Current/Saving Account	Name of the Company & No. of shares held	Face value of shares
	SBI, Kashi	NIL	NIL	3000/-	NIL	NIL
Spouse Name (Give name) Tapan Mohan	S-BI, Kashi	NIL	NIL	5,000/-	NIL	NIL
Dependant son(s) (Give name(s))	NIL	NIL	NIL	NIL	NIL	NIL
Dependant (daughters) (Give name(s))	NIL	NIL	NIL	NIL	NIL	NIL
Dependant (others) (Give name)	NIL	NIL	NIL	NIL	NIL	NIL
In Joint name(s) (Give names)	NIL	NIL	NIL	NIL	NIL	NIL

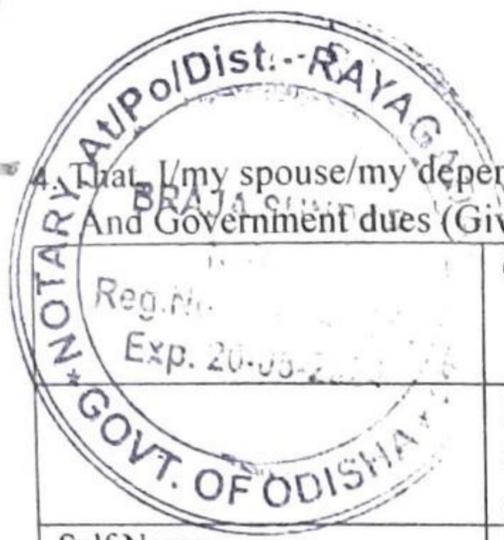
\*\*\*Dependant means a person wholly dependent on the income of the candidate

NO: 787  
DATE: 20/11/24  
TIME: 7:40 AM

Braja Sundar Nayak  
NOTARY, Raygada, Odisha

Ami Maghi  
DEPONENT

Contd... P/05..



I/My spouse/my dependants\*\*\* are liable to pay the following dues to public, financial institutions And Government dues (Give details):

	Government Dues		Income Tax Dues	Dues to financial Institutions	Any other Dues
	Details of the nature of demand/dues	Amount			
Self Name		NIL	ML	ML	ML
Spouse Name (Give name)		ML	ML	ML	ML
Dependant son(s) (Give name(s))		ML	ML	ML	ML
Dependant daughter(s) (Give name(s))		ML	ML	ML	ML
Dependant (others) (Give name)		ML	ML	ML	ML
In Joint name(s) (Give names)		ML	ML	ML	ML

\*\*\* Dependant means a person wholly dependent on the income of the candidate.

5. My educational qualification are as under:

(Enclose the details of School & University Educational Qualification)

9th class, Govt Girls' High School, Kandha - Malogaon, Dist. Rayagada

I, Ami Nayak do hereby verify and declare that the contents of this affidavit are true and correct to the best of my knowledge and belief, that no part of it is false and that nothing materials has been concealed therefrom.

Verified at Rayagada this the 20th day of January, 2022.

Ami Nayak  
**DEPONENT**

**WITNESSES:**

The above named deponent having been identified by Sri. B.S. Nayak Advocate, Rayagada on solemn affirmation admits the contents of the affidavit and puts his/her signature in my presence

- S/o Anura Nayak at 22 AM/PM
- Tyaga Nayak P-5-Kandha

Braja Sundar Nayak  
NOTARY Rayagada, Odisha

Identified by me

Advocate: Rayagada

NO: 787  
DATE: 20/1/22  
TIME: 1:40 PM