

Handwritten notes in blue ink at the top left, including a date and time: ୧୫.୧.୨୦୨୩ ୧୦:୫୫ PM

ପାରମ ସଂଖ୍ୟା-4
[ନିୟମ 12 (10) ଦ୍ରଷ୍ଟବ୍ୟ]
ମନୋନୟନ ପତ୍ର



ଜିଲ୍ଲାର ଜିଲ୍ଲା ପରିଷଦ ନିମନ୍ତେ ନିର୍ବାଚନ ।
କାମିଗୁଡ଼ / ହାତୁଣ୍ଡା

ମୁଁ ଜିଲ୍ଲା ପରିଷଦ ନିର୍ବାଚନ ନିମନ୍ତେ କାମିଗୁଡ଼ "ମ" ପରିଷଦ ନିର୍ବାଚନ ମଣ୍ଡଳୀରୁ ନିମ୍ନଲିଖିତ

ବ୍ୟକ୍ତିଙ୍କୁ ପ୍ରାର୍ଥୀ ଭାବରେ ମନୋନୀତ କରୁଅଛି ।

ପ୍ରାର୍ଥୀଙ୍କ ନାମ ଶ୍ରୀମତୀ ନାତକ

ପିତା/ପତିଙ୍କ ନାମ ଶ୍ରୀମତୀ ନାତକ

ତାଙ୍କର ଡାକ ଠିକଣା ଶ୍ରୀମତୀ ନାତକ, ପାଠକ-ପ୍ରକାଶନ ଥାନା-କୋଣାର୍କ, ଜିଲ୍ଲା-ହାତୁଣ୍ଡା

କାମିଗୁଡ଼ "ମ" ପରିଷଦ ନିର୍ବାଚନ ମଣ୍ଡଳୀର ଭୋଟର ତାଲିକାରେ ତାଙ୍କ ନାମ ଦରଜ ହୋଇଥିବା

କ୍ରମିକ ସଂଖ୍ୟା ୧୨୧, ଶ୍ରୀମତୀ ନାତକ, ପାଠକ-ପ୍ରକାଶନ ଥାନା-କୋଣାର୍କ, ଜିଲ୍ଲା-ହାତୁଣ୍ଡା

ମୋର ନାମ ଶ୍ରୀମତୀ ନାତକ ଅଟେ ଏବଂ କାମିଗୁଡ଼ "ମ"

ପରିଷଦ ନିର୍ବାଚନ ମଣ୍ଡଳୀର ଭୋଟର ତାଲିକାର କ୍ରମିକ ସଂଖ୍ୟା ୪୪୦, ଶ୍ରୀମତୀ ନାତକ, ପାଠକ-ପ୍ରକାଶନ ଥାନା-କୋଣାର୍କ, ଜିଲ୍ଲା-ହାତୁଣ୍ଡା

ଦରଜ କରାହୋଇଅଛି ।

ତାରିଖ ୨୦-୦୧-୨୦୨୨

Nageswar Naik
ପ୍ରସ୍ତାବକଙ୍କ ସ୍ଵାକ୍ଷର

ମୋର ନାମ ଶ୍ରୀମତୀ ନାତକ ଅଟେ ଏବଂ କାମିଗୁଡ଼ "ମ"

ପରିଷଦ ନିର୍ବାଚନ ମଣ୍ଡଳୀର ଭୋଟର ତାଲିକାର କ୍ରମିକ ସଂଖ୍ୟା ୧୩, ଶ୍ରୀମତୀ ନାତକ, ପାଠକ-ପ୍ରକାଶନ ଥାନା-କୋଣାର୍କ, ଜିଲ୍ଲା-ହାତୁଣ୍ଡା

ହୋଇଅଛି ।

ତାରିଖ ୨୦-୦୧-୨୦୨୨

Maneswar Naik
ସମର୍ଥକଙ୍କ ସ୍ଵାକ୍ଷର

ମୁଁ ଉପର ମନୋନୀତ ପ୍ରାର୍ଥୀ ମନୋନୟନ ପ୍ରତି ସମ୍ମତ ଜଣାଇଛି ଏବଂ ଏତଦ୍ଵାରା ଘୋଷଣା କରୁଅଛି ଯେ-

(କ) ମୋର ବୟସ ୨୯ ବର୍ଷ ସଂପୂର୍ଣ୍ଣ ହୋଇଅଛି ।

(ଖ) ମୁଁ କିଛି ଜମି/ସମ୍ପତ୍ତି ନାହିଁ ।

(ଗ) ପସନ୍ଦ ହେଉଥିବା ସଂକେତ, ପସନ୍ଦ କ୍ରମରେ (i) 'ଖି' ।

(ii) ଏବଂ (iii) ।

ଦ୍ରବିଧା

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

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

ପୁନଶ୍ଚ ମୁଁ ଘୋଷଣା କରୁଅଛି ଯେ ମୁଁ
.....

**କାଟି/ଜନକାଟିର ସଦସ୍ୟ ଯାହାକି ଓଡ଼ିଶା ରାଜ୍ୟର ଅନୁସୂଚିତ ଜାତି/ଅନୁସୂଚିତ ଜନଜାତି/ପଛଆବର୍ଗ ନାଗରିକ
ଅଟେ ।

ତାରିଖ ୨୦-୦୧-୨୦୨୨

Padmika Maik
ପ୍ରାର୍ଥୀଙ୍କ ସ୍ୱାକ୍ଷର

* ପ୍ରଯୋଜ୍ୟ ହେଉନଥିବା ପାରାକୁ କାଟି ଦିଅନ୍ତୁ ।

ପାଦ୍ମିକା ମାଠକ

** ପ୍ରଯୋଜ୍ୟ ହେଉନଥିବା ଶବ୍ଦକୁ କାଟି ଦିଅନ୍ତୁ ।

(ନିର୍ବାଚନ ଅଧିକାରୀଙ୍କଦ୍ୱାରା ପୂରଣ କାରି)

ମନୋନୟନ ପତ୍ର କ୍ରମିକ ସଂଖ୍ୟା

ଏହି ମନୋନୟନ ପତ୍ର ମୋତେ ମୋର କାର୍ଯ୍ୟାଳୟରେ ୨୦.୦୧.୨୦୨୨

ତାରିଖରେ ୨:୫୬ p.m. ସମୟରେ ପ୍ରାର୍ଥୀ/ପ୍ରସ୍ତାବକଙ୍କ ଦ୍ୱାରା ଦିଆଗଲା ।

ତାରିଖ ୨୦.୦୧.୨୦୨୨

ନିର୍ବାଚନ ଅଧିକାରୀ
ରାଜ୍ୟ ଜିଲ୍ଲାପାଳ
ଭାରତ

ନିର୍ବାଚନ ଅଧିକାରୀଙ୍କର ମନୋନୟନ ପତ୍ର ମଞ୍ଜୁର କରିବା ବା ନାମଞ୍ଜୁର କରିବା ନିଷ୍ପତ୍ତି

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

*ମନୋନୟନ ପତ୍ର ଗ୍ରାହ୍ୟ/ଅଗ୍ରାହ୍ୟ

ତାରିଖ

ନିର୍ବାଚନ ଅଧିକାରୀ

भारतीय गैर न्यायिक

दस
रुपये

रु. 10

TEN
RUPEES

Rs. 10



INDIA NON JUDICIAL



ODISHA

47AA 508540

AFFIDAVIT

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

*For election to the office of Sarpanch of _____ GP.
in _____ Block of _____ of District/Member
of Kashipur (B) (kha) Zone Zilla Parishad of Rayagada District/corporator
of _____ Municipal Corporation _____ District/Councillor
of _____ Municipality/N.A.C. of _____ District.

*(Please strike off the ones not applicable to you)

I Padmamila Naik @ Padammila Naik aged about 29 years wife of Shib Shankar Naik of Village Gulumihola, Po-Dangasil Ps-Doraguda, Dist-Rayagada candidate at the above election, do hereby solemnly affirm and state on oath as under:

**1(A) I have in the past been convicted of crime offence in the following case(s) and the details are as under: Nil

(i). Case No. _____

(ii). Section of the Act and description of the offence for which convicted

(iii) Date of conviction _____

(iv) Court by which convicted _____

DATE: _____
TIME: _____

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NOTARY, Rayagada-Odisha

Padmamila Naik

(v) Punishment imposed (indicate period of imprisonment awarded and/or quantum of the fine imposed).

(vi) Details of appeal/revision etc. against conviction.



(Repeat the above sequence in respect of each separate case of conviction)

(B) That I have in the past been discharged/acquitted in the following case(s)

(i) Section of the Act and description of the offence with which charged. Nil

Nil _____

(ii) The Court which had taken cognizance:

(iii) Case No. _____

(iv) 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

(i) Section of the Act and description of the offence for which cognizance taken:

(ii) The Court which had taken cognizance:

(iii) Case No. _____

(iv) Details of appeal/Application for revision etc., if any, filed against above

NO : 451
DATE: 15/1/2022
TIME: _____

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NOTARY, Rayagada-Odisha

* Padammila Nayak

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.

(1) That, I/my spouse/My dependants*** own the following movable property:-

1	2	3	4	5	6	7
Self Name	Nil	Nil	Gold 7 Tolas	4 Lakh 16 Thousand	25 Tolas	Rs 20,000/-
Spouse (Give Name)	Hero NXG Splender Bike	Rs. 20,000/-	Nil	136	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(s) [Give name(s)]	Nil	Nil	Nil	Nil	Nil	Nil
In joint name(s) [Give name]	Nil	Nil	Nil	Nil	Nil	Nil

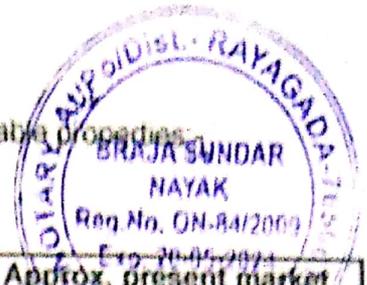
*** Dependant means a person wholly dependent on the income of the candidate.

NO: 45
DATE: 15/11/2022
TIME: 15/11/2022

Braja Sundar Nayak
NOTARY, Rayagada-Odisha

x Padma MITA Nayak

(2) That, if 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) <small>mentioned below</small>	Nil	Nil	Nil
Dependant son(s) [Give name(s)]	Nil	Nil	Nil
Dependant daughter(s) [Give name(s)]	Nil	Nil	Nil
Dependant others(s) (Give name and relationship)	Nil	Nil	Nil
In joint name(s) <small>Shyamsundar Nayak, Susant Nayak, Shushanta Nayak, Bijay Nayak, P. Chandra Nayak</small> (Give names)	Gulmoni Jholta	AC 0.205	Rs. 2 Lakhs

(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(s) (Give name and 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 :
DATE :
TIME :


Braja Sundar Nayak
NOTARY, Rayagada-Odisha

* Padma Lakshmi Nayak

3.(B) That, I/my spouse/My dependants*** have the following bank balance/deposits:-

	Name of the Bank	Amount in Fixed deposit	Name of the Bank / post office	Amount in Current / Savings Account	Name of the Company & No. of shares held	Face value of shares
1	2	3	4	5	6	7
Self Name	SBI BANK INDIAN BANK	2 Nil	Nil	2007977 1 LAKH 70	Nil	Nil
Spouse (Give Name) Shiv Shankar Naik	CANARA BANK BANK OF INDIA	Nil	Nil	RS. 2701 RS. 1000	Nil	Nil
Dependant son(s) [Give name(s)] X	SBI BANK CANARA BANK IDBI BANK UGTB BANK BANK OF INDIA BANK OF BARODA	Nil	RD of RS. 20,000 IN RAYAGADA POST OFFICE	RS. 200 RS. 19,540 RS. 1500 RS. 500 RS. 1000 RS. 1500	Nil	Nil
Dependant daughter(s) [Give name(s)] X	Nil	Nil	Nil	Nil	Nil	Nil
Dependant others(s) [Give name(s)] X	Nil	Nil	Nil	Nil	Nil	Nil
In joint name(s) [Give name] X	Nil	Nil	Nil	Nil	Nil	Nil

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



Braja Sundar Nayak
NOTARY Rayagada-Odisha

* Padammika Naik

NO : 451
DATE : 15-1-2022
TIME :

(4) That, I/my spouse/My dependants*** are liable to pay the following dues to public, financial institutions and Govt. dues (give details):-



1	Government Dues		Income Tax dues	Dues to Financial Institutions	Any other dues
	Details of the nature of demand / dues	Amount			
Self Name	Nil	Nil	Nil	SHG GROUP	Rs. 15,000
Spouse ^{Shib Sankar Naik} (Give Name)	Nil	Nil	Nil	KEC BAN SRI DANGASIL	Rs. 80,000
Dependant son(s) [Give name(s)]	Nil	Nil	Nil	Nil	Nil
Dependant daughter(s) [Give name(s)]	Nil	Nil	Nil	Nil	Nil
Dependant others(s) [Give name(s)]	Nil	Nil	Nil	Nil	Nil
In joint name(s) [Give names]	Nil	Nil	Nil	Nil	Nil

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

5. My Educational Qualification is as under: 5th class AT BADAMARIHATA Ashram School, Kashi Pur Block.
(Give the details of School & University Education)

I, Padammika Naik, do hereby verify and declare that contents of this affidavit are true and correct to the best of my knowledge and belief, that no fact of it is false and that nothing materials has been concealed there from.

Verified at Rayagada this, the 15th day of January 2022.

Padammika Naik
DEPONENT

Witnesses

- Prasantakumari Naik s/o Sambasudra Naik
AT. Badamarighatta, PO-Gorakhpur
PS. Kashi Pur, Dist. Rayagada
- Siba Sankar Naik s/o Sambasudra Naik
"Bhumishala" PS. Dangsila

NO : 45
DATE :
TIME : 2:15

The above named deponent having been identified by Sri. *[Signature]* Advocate, Rayagada, on solemn affirmation admits the contents of the affidavit and puts his/her signature in my presence at 2:15 AM/PM.

[Signature]
Braja Sundar Nayak
NOTARY, Rayagada-Odisha