

20-1-2022  
12:50 PM

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



..... ଉପରୋକ୍ତ ..... ଜିଲ୍ଲାର ଜିଲ୍ଲା ପରିଷଦ ନିମନ୍ତେ ନିର୍ବାଚନ ।

ମୁଁ ଜିଲ୍ଲା ପରିଷଦ ନିର୍ବାଚନ ନିମନ୍ତେ ..... କଲ୍ୟାଣ ସିନ୍ଧୁ 'କ' ..... ପରିଷଦ ନିର୍ବାଚନ ମଞ୍ଚଳାରୁ ନିମ୍ନଲିଖିତ ବ୍ୟକ୍ତିଙ୍କୁ ପ୍ରାର୍ଥୀ ଭାବରେ ମନୋନୀତ କରୁଅଛି ।

ପ୍ରାର୍ଥୀଙ୍କ ନାମ ..... ସାମୁ ସିନ୍କା ।

ପିତା/ପତିଙ୍କ ନାମ ..... ସିନ୍କା ନାଥା .....

ତାଙ୍କର ଡାକ ଠିକଣା ..... ଗ୍ରାମ- କାଳାମେଡ଼ି, ପୋ.ପା:- ସିନ୍କାପୁରୀ, ଥାନା- କଲ୍ୟାଣ ସିନ୍ଧୁ, ପରିଷଦ ନିର୍ବାଚନ ମଞ୍ଚଳାର ଭୋଟର ତାଲିକାରେ ତାଙ୍କ ନାମ ଦରଜ ହୋଇଥିବା

କ୍ରମିକ ସଂଖ୍ୟା <sup>ଡି.ନଂ</sup> 2/118 ସିନ୍କାପୁରୀ ଥାନା

ମୋର ନାମ ..... ଅମୃତ କର୍କିକା ..... ଅଟେ ଏବଂ ..... କଲ୍ୟାଣ ସିନ୍ଧୁ 'କ' .....

ପରିଷଦ ନିର୍ବାଚନ ମଞ୍ଚଳାର ଭୋଟର ତାଲିକାର କ୍ରମିକ ସଂଖ୍ୟା <sup>ଡି.ନଂ</sup> 2/174 କ୍ର. ସିନ୍କାପୁରୀ ଥାନା

ଦରଜ କରାହୋଇଅଛି ।

ଅମୃତ କର୍କିକା

ତାରିଖ ..... 20-01-2022

ପ୍ରସାବକ ସ୍ଵାକ୍ଷର

ମୋର ନାମ ..... ସାମୁ ସିନ୍କା ..... ଅଟେ ଏବଂ ..... କଲ୍ୟାଣ ସିନ୍ଧୁ 'କ' .....

ପରିଷଦ ନିର୍ବାଚନ ମଞ୍ଚଳାର ଭୋଟର ତାଲିକାର କ୍ରମିକ ସଂଖ୍ୟା <sup>ଡି.ନଂ</sup> 2/130 କ୍ର. ସିନ୍କାପୁରୀ ଥାନାରେ ତାହା ଦରଜ

ହୋଇଅଛି ।

ସାମୁ ସିନ୍କା

ତାରିଖ ..... 20-01-2022

ସମର୍ଥକ ସ୍ଵାକ୍ଷର

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

(କ) ମୋର ବୟସ ..... 27 ..... ବର୍ଷ ସଂପୂର୍ଣ୍ଣ ହୋଇଅଛି ।

\* (ଖ) ମୁଁ ..... କଲ୍ୟାଣ ସିନ୍ଧୁ ଥାନା, (ମାର୍ଚ୍ଚ ୨୦୧୫) ..... ଜିଲ୍ଲାରୁ ଏହି ନିର୍ବାଚନରେ ଛିଡା ହୋଇଛି ।

(ଗ) ପସନ୍ଦ ହେଉଥିବା ସଂକେତ, ପସନ୍ଦ କ୍ରମରେ (i) ..... ହାତୁଡ଼ି, ଜା ୭୯୧୨

(ii) ..... କଲ୍ୟାଣ ସିନ୍କା ..... ଏବଂ (iii) ..... କଲ୍ୟାଣ

ପ୍ରତିଧ୍ୟା

(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 ..... ଅଯୋଗ୍ୟ ନୁହେଁ ।

ପୁନଶ୍ଚ ମୁଁ ଘୋଷଣା କରୁଅଛି ଯେ ମୁଁ ..... ଅନୁସୂଚିତ ଜନଜାତି (କେ.ଡି.)

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

ତାରିଖ ..... 21/1/2022

ମାତୃ ବିକଳା  
ପ୍ରାର୍ଥୀଙ୍କ ସ୍ୱାକ୍ଷର

\* ପ୍ରଯୋଜ୍ୟ ହେଉନଥିବା ପାରାକୁ କାଟି ଦିଅନ୍ତୁ ।

\*\* ପ୍ରଯୋଜ୍ୟ ହେଉନଥିବା ଶବ୍ଦକୁ କାଟି ଦିଅନ୍ତୁ ।

(ନିର୍ବାଚନ ଅଧିକାରୀଙ୍କଦ୍ୱାରା ପୂରଣ କାରି)

ମନୋନୟନ ପତ୍ର କ୍ରମିକ ସଂଖ୍ୟା ..... 03

ଏହି ମନୋନୟନ ପତ୍ର ମୋତେ ମୋର କାର୍ଯ୍ୟାଳୟରେ ..... 20.01.2022

ତାରିଖରେ ..... 2.53 p.m. ସମୟରେ ପ୍ରାର୍ଥୀ/ପ୍ରସ୍ତାବକଙ୍କ ଦ୍ୱାରା ଦିଆଗଲା ।

ତାରିଖ ..... 20/1/22

ନିର୍ବାଚନ ଅଧିକାରୀ  
ଉପ ଜିଲ୍ଲାପାଳ  
ପାଟଣା

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

पाँच रुपये

FIVE RUPEES



सत्यमेव जयते

भारत INDIA

INDIA NON JUDICIAL



FORMAT OF AFFIDAVIT

16AA 229076

(To be submitted by candidate to the Election Officer/ Returning Officer as an accompaniment to the Nomination Paper). Before the Sub-Collector / Election Officer, Rayagada

\*For election to the office of .....  
G.P. in .....Block of .....District/  
Member of .....P.S. of .....District/  
Member of Kalyansingpur <sup>Ka<sup>zone</sup></sup> Zilla Parishad of Rayagada District.

I, SIKAKA MANU, Aged 27 years S/o: Sikaka Napa,  
Vill: Kangseni, PO: Singani, PS: K. Singpur, Dt: 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 criminal offence in the following case(s) and the details are as under:-
- |       |                                                                        |        |
|-------|------------------------------------------------------------------------|--------|
| (i)   | Case No.                                                               | :- Nil |
| (ii)  | Section of the Act and description of the offence for which convicted. | :- Nil |
| (iii) | Date of Conviction                                                     | :- Nil |
| (iv)  | Court by which convicted                                               | :- Nil |

..p/2

Sikaka Manu

Deponent

Braja Sundar Nayak  
NOTARY Rayagada-Odisha

681

NO : .....  
DATE: 10/11/24  
TIME: .....

भारतीय गैर न्यायिक

पाँच रुपये

FIVE RUPEES

रु.5

RS.5



सत्यमेव जयते

भारत INDIA

INDIA NON JUDICIAL

1/2/11

NOTARY, RAIPUR (Dist. - RAYAGADA)  
BRAJA SUNDAR  
NAYAK  
Reg. No. ON-84/1009  
Exp. 20/03-2024

(v) Imprisonment imposed (indicate period of imprisonment awarded and/or quantum of the fine imposed). :- Nil  
16AA 229004

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

(ii) The Court which had taken cognizance. :- Nil

(iii) Case No. :- Nil

(iv) Details of appeal/application for revision etc., if any, filed against above order taking cognizance. :- Nil

(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:-

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

(ii) The Court which has taken cognizance. :- Nil

(iii) Case No. :- Nil

(iv) Details of appeal/application for revision etc., if any, filed against above order taking cognizance. :- Nil

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NO : .....  
DATE: 18/1/2011 (Repeat the above sequence in respect of each separate case of cognizance by Court).

TIME: .....  
\* 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.

Braja Sundar Nayak  
NOTARY, Rayagada-Odisha p/3 Sikaka Manu  
Contd P/3

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

(A)

Agricultural Land(s)	Location	Area	Approx. present Market Value according to you
Self name - Srikaka Manu Nil.	-	-	-
Spouse, Smt. Sabita (Give name) Srikaka Nil.	-	-	-
Dependant son(s) - Goutam [Give name(s)] Srikaka Nil.	-	-	-
Dependant daughter(s) [Give name(s)] Nil.	-	-	-
Dependant (others) Grand (Give name and relationship) father Mohan HIKAKA.	Mauza - Kangsem of K. Singh Tahasil	Ac 2.00	Rs 2,00,000/-
In Joint name(s) (Give names) Nil.	-	-	-

(B)

Urban Land(s)	Location	Area	Approx. present Market Value according to you
Self name Nil.	-	-	-
Spouse (Give name) Nil.	-	-	-
Dependant son(s) [Give name(s)] Nil.	-	-	-
Dependant daughter(s) [Give name(s)] Nil.	-	-	-
Dependant (others) (Give name and relationship) Nil.	-	-	-
In Joint name(s) (Give names) Nil.	-	-	-

681

NO: .....

DATE: 18/11/22

TIME: .....

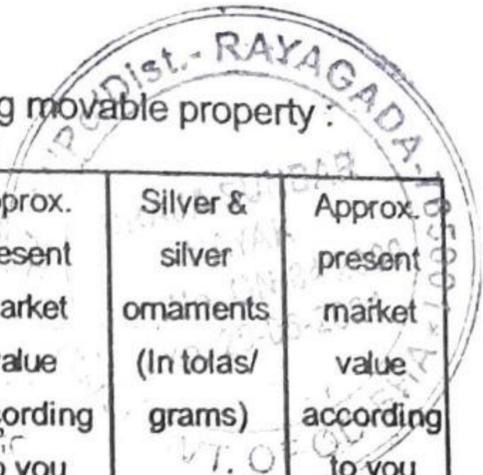
Braja Sundar Nayak  
NOTARY, Raygada, Odisha

Srikaka Manu

DEPONENT

Contd- P/4.

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



	Motor vehicle with description such as Car, Jeep, Truck, Bus	Approx. present market value according to you	Gold & gold ornaments; other precious stone(s) (in tolas/gram/ carat)	Approx. present market value according to you	Silver & silver ornaments (In tolas/ grams)	Approx. present market value according to you
Self name	M.C.-HF- Do Lux-OD-18- D-8017	Rs 50,000/-	1 1/2 tola	Rs 80,000/-	Nil	-
Spouse (Give name)	Nil	-	60 gm	Rs. 3,00,000/-	200 gm	Rs. 20,000/-
Dependant son(s) [Give name(s)]	Nil	-	Nil	-	Nil	-
Dependant daughter(s) [Give name(s)]	Nil	-	Nil	-	Nil	-
Dependant (others) [Give name (s)]	Nil	-	Nil	-	Nil	-
In Joint name(s) (Give names)	Nil	-	Nil	-	Nil	-

Signature of Deponent  
DEPONENT  
Contd- P/5

Braja Sundar Nayak  
NOTARY, Rayagada-Odisha

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NO : .....  
DATE: 18/1/22  
TIME: .....

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
Self name	Nil	-	SBI, R. Singhpur	Rs. 10,000/-	L.I.C. -	Rs 5000/- P.A
Spouse (Give name)	Nil	-	SBI, R. Singhpur	Rs. 20,000/-	Nil	-
Dependant son(s) [Give name(s)]	Nil	-	Nil	-	Nil	-
Dependant daughter(s) [Give name(s)]	Nil	-	Nil	-	Nil	-
Dependant (others) (Give name and relationship)	Nil	-	SBI, R. Singhpur	Rs. 60,000/-	Nil	-
In Joint name(s) (Give names)	Nil	-	Nil	-	Nil	-

4. That, 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		Nil	Nil	Nil
Spouse (Give name)	Nil		Nil	Nil	Nil
Dependant son(s) [Give name(s)]	Nil		Nil	Nil	Nil
Dependant daughter(s) [Give name(s)]	Nil		Nil	Nil	Nil
Dependant (others) [ Give name (s) ]	Nil		Nil	Nil	Nil
In Joint name(s) (Give names)	Nil		Nil	Nil	Nil

681.

NO: \_\_\_\_\_  
 DATE: 15/11/22  
 TIME: \_\_\_\_\_

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

  
 Braja Sundar Nayak  
 NOTARY Rayagada-Odisha

- Srikaka Mamu  
 DEPENDANT  
 Contd. P/6

5. My educational qualification are as under: - 9th pass from Singari H.S  
(Give the details of School & University Education) Singari.

6. That, I have not more than two children and not more than one spouse living.  
That, I am able to read and write Odia:

I, ....Sikara Manu....., do hereby verify and de-

clare 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 18th day of January 2022....

*Sikara Manu*  
Deponent

Witnesses :

1.

2.

Identified by me:

*[Signature]*  
Advocate, Rayagada. 18/1/2022

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

18/1/22

*[Signature]*  
Braja Sundar Nayak  
NOTARY, Rayagada-Odisha



681

NO : .....

DATE: 18/1/22

TIME: ..... OGP—MP—PTS-U-1 (S. E. C.) 80—80,000 Bks.—7-10-2021