

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 Sarpanch of GP. in
..... Block of District / Member of
..... P. S. of District / Member of
Zone No-4 Balasore Zilla Parishad of Balasore District / Corporator of
..... Municipal Corporation of District / Councillor of
..... Municipality / NAC of District.

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

I Rashmita Mohapatra, son / daughter / wife of
Sashanka Sekhar Mohapatra 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

Section of the Act and description of the offence for which convicted.

Nil

(iii) Date of Conviction Nil

(iv) Court by which convicted Nil



Rashmita Mohapatra. Identified by [Signature] 10/11/22

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

..... Nil

..... Nil

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

..... Nil

..... Nil

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

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 :

..... Nil

(iii) Case No. Nil

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

..... Nil

..... Nil

..... Nil

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



to Rosanita Mahapatra

verified on 12/01/22

(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

..... Nil

..... Nil

..... Nil

(ii) The Court which has taken cognizance :

..... Nil

Case No. : Nil

Details of appeal / application for revision etc., if any, filed against above order taking cognizance :

..... Nil

..... Nil

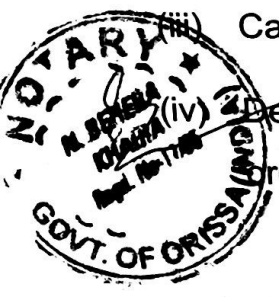
..... Nil

(Repeat the above sequence in respect of each separate case of cognizance by Court)

** 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.

19/10/2012
Rashmi Mohapatra

Rashmi Mohapatra



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

(A)

Agricultural Land(s)	Location	Area	Approx. present Market Value according to you
Self name	Nil	Nil	Nil
Spouse (Give name) Sashan ka Sekhar Mohapatra Husband	Natapada Bisunpur Punastampur @Khanna	Ao. 24 des. Ao. 32 " A. 0. 20 "	500000.00 400000.00 600000.00
Dependant son(s) [Give name(s)]	Nil	Nil	Nil
Dependant daughter(s) [Give name(s)]	Nil	Nil	Nil
Dependant (others) (Give name and relationship) Late. Bharat Ch. Mohapatra.	Natapada MahanaSahi etc.	A. 7.00	Rs - 25,00000.00
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 and relationship)	Nil	Nil	Nil
In Joint name(s) (Give names)	Nil	Nil	Nil

Rajendra Mohapatra, Notary Public, Govt. of Orissa, Cuttack.

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	Value of shares
Self name	Nil	Nil	Uco Bank Khairo	20,000.00 15,000.00 15,000.00	Sakara Gandia	5000
Spouse (Give name)	Sashanka Sekhar Mohapatra Uco Bank	50,000.00	SBI S.B.C.C SBI Uco Bank Cooperative	10,000.00 1,50,000.00 15,000.00	Nil	Nil
Dependant son(s) [Give name(s)]	Nil	Nil	Nil	Nil	Nil	Nil
Dependant daughter(s) [Give name(s)]	Sai Suman Mohapatra Nil	Nil	S.B.I	1000.00	Nil	Nil
Dependant (others) (Give name and relationship)	Nil	Nil	Nil	Nil	Nil	Nil
Joint name(s) (Give names)	Nil	Nil	Nil	Nil	Nil	Nil



Identified by Sashanka Mohapatra.

12/10/22

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		Pay-100000.00 upto 11-2020-21	Nil	Nil
Spouse (Give name) Sashanka Sekhar Mohapatra	S.C.S. k haina. Rs-2,00,000.00		Nil	Nil	Nil
Dependant son(s) [Give name(s)]	Nil		Nil	Nil	Nil
Dependant daughter(s) [Give name(s)] Sai Smriti Mohapatra	Nil		Nil	Nil	Nil
Dependant (others) [Give name (s)]	Nil		Nil	Nil	Nil
In Joint name(s) (Give names)	Nil		Nil	Nil	Nil

22/11/20
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 02/11/20
 01/11/20
 to Rasmita Mohapatra.

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



5. My educational qualification are as under: H.S.C. Pass
(Give the details of School & University Education) Nahanga High school
Board of secondary Edu

I, Rashmita Mohapatra, 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 Khairina this, the 19th day of Jan 2022

Rashmita Mohapatra

Deponent

Witnesses:

- Pratap Kumar Mohapatra Identified by Dad 19/01/22
At Matapala Patta Khairina
- Rabindranath Kuman Sahoo
At Dehera, Pusa @ Khairina.

R. Mohapatra
 Deponent being identified by
N. Dehera
 Advocate
 and (Signature) the facts
 stated above are true to the best
 of my knowledge and belief and I
 declare under the penalty of perjury
 that the contents of this affidavit are true
 and correct to the best of my knowledge
 and belief.

(N. DEHERA)
 Advocate
 Khairina
19/01/22