

51-01

Received
at 1.37 pm

1

ପାରମ ସଂଖ୍ୟା-4

[ନିୟମ 12 (10) ଦ୍ରଷ୍ଟବ୍ୟ]

ମନୋନୟନ ପତ୍ର

ସୁନହରଣ

ଜିଲ୍ଲାର ଜିଲ୍ଲା ପରିଷଦ ନିମନ୍ତେ ନିର୍ବାଚନ ।

ମୁଁ ଜିଲ୍ଲା ପରିଷଦ ନିର୍ବାଚନ ନିମନ୍ତେ ~~କୋଉଡା-୧~~ କୋଉଡା (କେ) ପରିଷଦ ନିର୍ବାଚନ ମଣ୍ଡଳୀରୁ ନିମ୍ନଲିଖିତ

ବ୍ୟକ୍ତିଙ୍କୁ ପ୍ରାର୍ଥୀ ଭାବରେ ମନୋନୀତ କରୁଅଛି ।

ପ୍ରାର୍ଥୀଙ୍କ ନାମ ସୁଶୀଳା ସୁସ୍ମା

ପିତା/ପତିଙ୍କ ନାମ ବିଶ୍ୱେନ୍ଦ୍ର ସୁସ୍ମା

ତାଙ୍କର ଡାକ ଠିକଣା ଗ୍ରାମ-କୁମ୍ଭାକୁଦର, ଗୋ. ଗୋପନା, ମାନା-କ-ପଲ୍ଲୀ-୯୦
କୋଉଡା (କେ) ପରିଷଦ ନିର୍ବାଚନ ମଣ୍ଡଳୀର ଭୋଟର ତାଲିକାରେ ତାଙ୍କ ନାମ ଦରଜ ହୋଇଥିବା

କ୍ରମିକ ସଂଖ୍ୟା ୪୪, ଭାଟନିପୁର-୦୧, ଗୋପନା ଗ୍ରା. ପଲ୍ଲୀ-୯୦

ମୋର ନାମ ଉମେଶ୍ୱରୀ କୁମାରୀ ମାତ୍ରାନ୍ତୁ ଅଟେ ଏବଂ କୋଉଡା (କେ)

ପରିଷଦ ନିର୍ବାଚନ ମଣ୍ଡଳୀର ଭୋଟର ତାଲିକାର କ୍ରମିକ ସଂଖ୍ୟା ୧୪, ଭାଟନି ୧୦, ରେ ତାହା ଗୋପନା ଗ୍ରାମ ପଲ୍ଲୀ-୯୦

ଦରଜ କରାହୋଇଅଛି ।

ତାରିଖ ୨୦/୦୧/୨୦୨୨ * ଉମେଶ୍ୱରୀ କୁମାରୀ ମାତ୍ରାନ୍ତୁ ପ୍ରସ୍ତାବକଙ୍କ ସ୍ୱାକ୍ଷର

ମୋର ନାମ ବିମ୍ବଲୁ ସୁସ୍ମା ଅଟେ ଏବଂ କୋଉଡା (କେ)

ପରିଷଦ ନିର୍ବାଚନ ମଣ୍ଡଳୀର ଭୋଟର ତାଲିକାର କ୍ରମିକ ସଂଖ୍ୟା ୩୪, ଭାଟନି-୦୧, ରେ ତାହା ଦରଜ ହୋଇଅଛି । ଗୋପନା ଗ୍ରାମ ପଲ୍ଲୀ-୯୦

ତାରିଖ ୨୦/୦୧/୨୦୨୨ * ବିମ୍ବଲୁ ସୁସ୍ମା ସମର୍ଥକଙ୍କ ସ୍ୱାକ୍ଷର

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

(କ) ମୋର ବୟସ ୩୧ ବର୍ଷ ସଂପୂର୍ଣ୍ଣ ହୋଇଅଛି ।

* (ଖ) ମୁଁ ~~ଉପର~~ କମ୍ପ୍ୟୁଟର ପାଠିକ (ମୋ କର୍ତ୍ତୃତ୍ୱାଧୀନ) ଦଳଦ୍ୱାରା ଏହି ନିର୍ବାଚନରେ ଛିଡା ହୋଇଛି ।

(ଗ) ପସନ୍ଦ ହେଉଥିବା ସଂକେତ, ପସନ୍ଦ କ୍ରମରେ (i) ଗା. ଦା. ବି. ବି. ପା. ହା.

(ii) x ଏବଂ (iii) x ୧୧/୧୨/୨୦୨୨

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

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

ପୁନଶ୍ଚ ମୁଁ ଘୋଷଣା କରୁଅଛି ଯେ ମୁଁ ସୁମାତା ସୁସ୍ତା 'ସୁସ୍ତା'

**କାତି/ଜନକାତିର ସଦସ୍ୟ ଯାହାକି ଓଡ଼ିଶା ରାଜ୍ୟର ଅନୁସୂଚିତ କାତି/ଅନୁସୂଚିତ ଜନକାତି/ପଛୁଆବର୍ଗ ନାଗରିକ
ଅଟେ ।

ତାରିଖ ୨୦/୦୧/୨୦୨୨

ସୁମାତା ସୁସ୍ତା
ପ୍ରାର୍ଥୀଙ୍କ ସ୍ୱାକ୍ଷର

* ପ୍ରଯୋଜ୍ୟ ହେଉନଥିବା ପାରାକୁ କାଟି ଦିଅନ୍ତୁ ।

** ପ୍ରଯୋଜ୍ୟ ହେଉନଥିବା ଶବ୍ଦକୁ କାଟି ଦିଅନ୍ତୁ ।

(ନିର୍ବାଚନ ଅଧିକାରୀଙ୍କଦ୍ୱାରା ପୂରଣ କାରି)

ମନୋନୟନ ପତ୍ର କ୍ରମିକ ସଂଖ୍ୟା ୧

ଏହି ମନୋନୟନ ପତ୍ର ମୋତେ ମୋର କାର୍ଯ୍ୟାଳୟରେ ୨୦. ୧. ୨୦୨୨

ତାରିଖରେ ୧. ୩୨ ବି. ସମୟରେ ପ୍ରାର୍ଥୀ/ପ୍ରସ୍ତାବକଙ୍କ ଦ୍ୱାରା ଦିଆଗଲା ।

ତାରିଖ ୨୦. ୧୧. ୨୦୨୨

ନିର୍ବାଚନ ଅଧିକାରୀ
State Election Commission
Collector / Sub-Collector

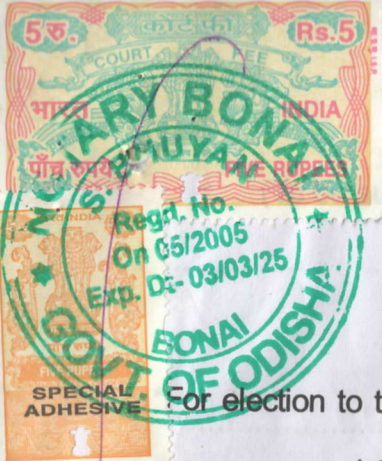
ନିର୍ବାଚନ ଅଧିକାରୀଙ୍କର ମନୋନୟନ ପତ୍ର ମଞ୍ଜୁର କରିବା ବା ନାମଞ୍ଜୁର କରିବା ନିଷ୍ପତ୍ତି

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

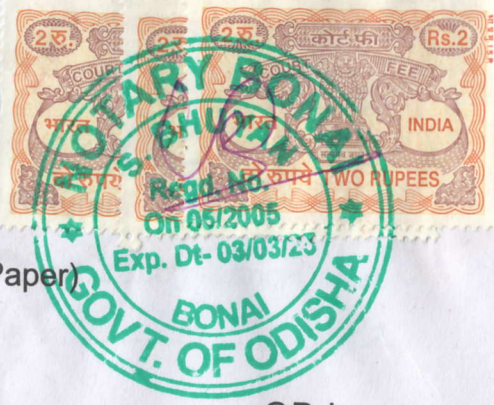
*ମନୋନୟନ ପତ୍ର ଗ୍ରାହ୍ୟ/ଅଗ୍ରାହ୍ୟ

ତାରିଖ ୨୨/୧/୨୨

ନିର୍ବାଚନ ଅଧିକାରୀ



Before **S. Bhuyan, Notary**
Bonai
FORMAT OF AFFIDAVIT



Submitted by candidate to the Election Officer,

as an accompaniment to the Nomination Paper,

For election to the office of Sarpanch of G.P. in
..... Block of District, / Member of
..... P. S. of District / Member of
..... Zilla Parishad of District / Corporator of
..... Municipal Corporation of District / Councillor of
..... Municipality / NAC of District.

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

I, Sushila Munda, aged about 31yr, daughter / wife of
Binendra Munda, residing with Chhatekuda P.S. K. Bolega,
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 NIL
- (ii) Section of the Act and description of the offence for which convicted.
..... NIL NIL
- (iii) Date of Conviction NIL
- (iv) Court by which convicted NIL



ସୁଶିଳା ମୁନ୍ଦା

(v) Punishment imposed (indicate period of imprisonment awarded and / or 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)

(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 :

NIL

(iii) Case No. NIL

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

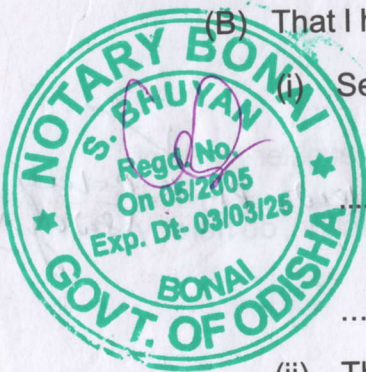
NIL

NIL

NIL

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

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(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 :

① RAILWAY MISC. CASE NO. - 17/2020 U/S 145(b),

147, 174(a) of The Railway Act, 1989. Court of S.D.J.M., Bonaai.

② G.R. Case No. - 539/2021, U/S 143, 149, 150, 152, 186,

341, 343, 120(a), 188, of IPC, Sec 269, 30 of Epidemic Disease Act, 1897, Section 146, 147, 174, of The Railway Act, 1989 and Section 6 & 7 of The Odisha Essential Service Maintenance Act, 1968 of the

(ii) The Court which has taken cognizance : Court of S.D.J.M., Bonaai

Court of S.D.J.M., Bonaai.

(iii) Case No. : R.M.C. No. - 17/2020 & G.R. No. - 539/2021

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

NIL

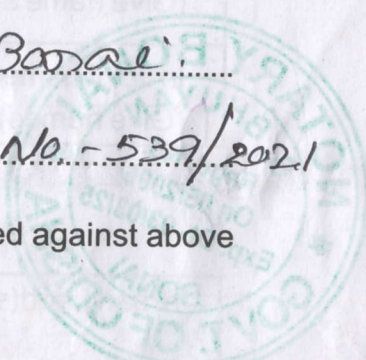
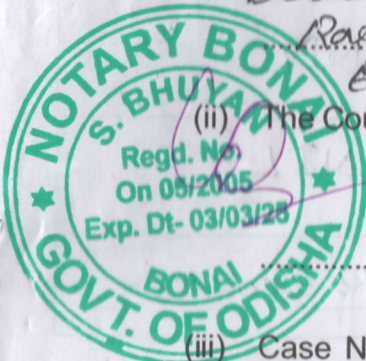
NIL

NIL

(Repeat the above sequence in respect of each separate case of 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.

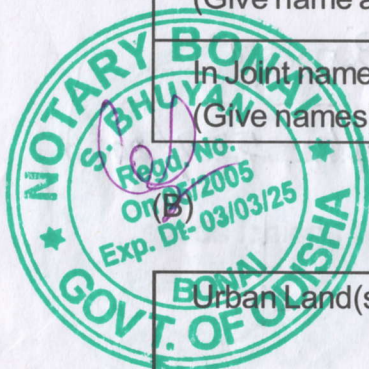
ଶ୍ରୀମତୀ ସୁମିତ୍ରା



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	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) <i>CO-R.F. Namey Bones Munda Father-in-law</i>	<i>Chhinda Kudaa</i>	<i>First 1/2 then 1/2 An area Ac. 00.45d</i>	<i>Rs. 45,000/-</i>



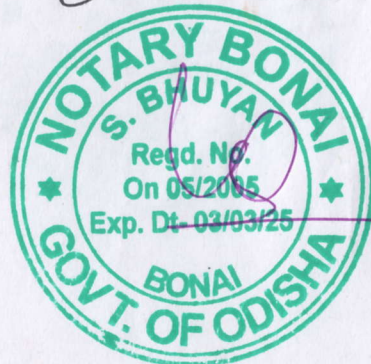
Urban Land(s)	Location	Area	Approx. present Market Value according to you
Self name	NIL	NIL	NIL
Spouse (Give name)	NIL	NIL	NIL
Dependant son(s) [Give name(s)]	NIL	NIL	NIL
Dependant daughter(s) [Give name(s)]	NIL	NIL	NIL
Dependant (others) (Give name and relationship)	NIL	NIL	NIL
In Joint name(s) (Give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

ଶ୍ରୀମତୀ ସୁମିତ୍ରା

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

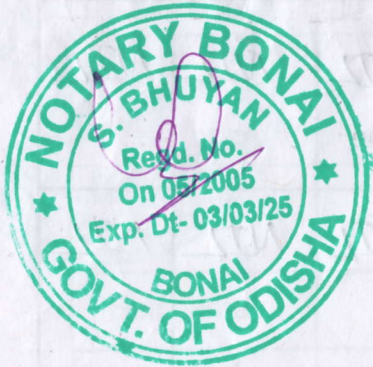
	Motor vehicle with description such as Car, Jeep, Truck, Bus	Approx. present market value according to you	Gold & gold ornaments; other precious stone(s) (in tolas/gram/ carat)	Approx. present market value according to you	Silver & silver ornaments (In tolas/ grams)	Approx. present market value according to you
Self name	Manuti Suzuki SWIFT.	Rs. 4,00,000/-	20g.m	Rs. 1,00,000/-	40g.m	Rs. 7,000/-
Spouse (Give name)	NIL	NIL	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 name (s)]	NIL	NIL	NIL	NIL	NIL	NIL
In Joint name(s) (Give names)	NIL	NIL	NIL	NIL	NIL	NIL

ସ୍ୱାମୀ ଓ ସ୍ତ୍ରୀ



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	S.B.I. Bimalgarh	NIL	NIL	Rs. 20,000/-	NIL	NIL
Spouse (Give name)	NIL	NIL	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 name and relationship)	NIL	NIL	NIL	NIL	NIL	NIL
In Joint name(s) (Give names)	NIL	NIL	NIL	NIL	NIL	NIL



29/12/21 2/6/21

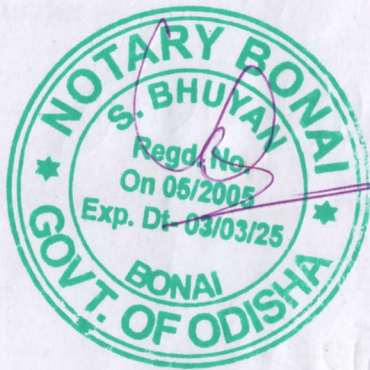


4. That, I / my spouse / my dependants*** are liable to pay the following dues to public, financial institutions and Government dues (Give details).

	Government Dues		Income Tax Dues	Dues to Financial Institutions	Any other Dues
	Details of the nature of demand/dues	Amount			
Self name <i>Paresh Chandra Munda</i>	<i>S.B.T. Bimlaegonh</i>		<i>NIL</i>	<i>Rs. 12000</i>	<i>NIL</i>
Spouse (Give name)	<i>NIL</i>		<i>NIL</i>	<i>NIL</i>	<i>NIL</i>
Dependant son(s) [Give name(s)]	<i>NIL</i>		<i>NIL</i>	<i>NIL</i>	<i>NIL</i>
Dependant daughter(s) [Give name(s)]	<i>NIL</i>		<i>NIL</i>	<i>NIL</i>	<i>NIL</i>
Dependant (others) [Give name (s)]	<i>NIL</i>		<i>NIL</i>	<i>NIL</i>	<i>NIL</i>
In Joint name(s) (Give names)	<i>NIL</i>		<i>NIL</i>	<i>NIL</i>	<i>NIL</i>

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

ଶ୍ରୀମତୀ ଶ୍ରୀମତୀ



Sl. No.
Date:
Solemnly affirmed & declared
before me on identification by
Sh.
Advocate, Bonai

S. Bhuyan
Notary Bonai
Regd. No. On 05/2005
Govt. of Odisha

5. My educational qualification are as under :

(Give the details of School & University Education) +2 Arts pass.

Balanipant Mahavidyalaya, Thendapali
C/o Binendra Munda, At. Chhida-
Kudan, P.S. Kbalang, Dist. Sundargarh

I, Sushila Munda, aged about 31 years, 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 Bonaie this, the 17th day of January 2022.

ସୁଶିଳା ମୁଣ୍ଡା
Deponent

Witnesses :

- ମୁକ୍ତେଶ୍ୱର ମୁଣ୍ଡା
- ବ୍ରଜେଶ୍ୱର ମୁଣ୍ଡା



ସୁଶିଳା ମୁଣ୍ଡା

Identified the deponent.
Bongab
Jan 17/1/22

Sl. No. 38
Date 17/1/22
Solemnly affirmed & declared before me on identification by Sri S. Spant Advocats Bonaie

S. Bhuyan
Notary, Bonai
Regd. No. ON 05/2005
Govt. of Odisha

