

S.No. 56

CHECKLIST W.No. 2

Sl No	Name of the Document	Submitted	To be Submitted
01	Nomination paper duly filled up & full signature of the proposer, sender candidate.	✓	
02	M.R ( Money Receipt)	✓	
03	Affidavit duly filled up & signed by the candidate in each page	✓	
04	Affidavit on more than two children & one spouse	✓	
05	Caste certificate in case of SC/ST.	✓	
06	Party Ticket in Form IX & X	✓	
07	Voter ID/ Aadhar Card		To be submitted
08	Clearance of Tax Form NAC/ Municipality.	✓	

Election Officer

Dt.

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## Receipt for deposit amount

(Prescribed by the State Election Commission)

No. 87

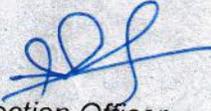
Date 06-03-2022

Received from Smt./Shri Treutiya Setu

Rs. 100/- (Rupees One hundred Only)

on account of security deposit for candidature for the office of the \* Councillor/~~Corporator~~ of  
Ward No 02 of Banganh \* Municipality / ~~N.A.C.~~ /Municipal Corporation.

Place Banganh



Election Officer

\* Strike out whichever is not applicable.

OGP—MP—DTP-U-2 (SEC) 48—3,000 Bks.—25-5-2018

56

ପ୍ରାର୍ଥୀଙ୍କ ଘୋଷଣା

ମୁଁ ଓଡ଼ିଶା ମ୍ୟୁନିସିପାଲ (ଓଡ଼ିଶା ଉପରାଜ୍ୟ ସାନିଟାରିଆ ଓ ଆସନ ଆରକ୍ଷଣ ଓ ନିର୍ବାଚନ ପରିଚାଳନା) ନିୟମାବଳୀ, 1994ର ନିୟମ 25 ଅନୁଯାୟୀ ଘୋଷଣା କରୁଅଛି ଯେ ମୋର ବୟସ 21 ବର୍ଷ ଅଟେ ଏବଂ ମୁଁ ନିର୍ବାଚନରେ ପ୍ରାର୍ଥୀ ହେବାକୁ ଇଚ୍ଛୁକ । ମୁଁ ପୁନଶ୍ଚ ଘୋଷଣା କରୁଅଛି ଯେ ମୁଁ ଏହି ନିର୍ବାଚନ ପାଇଁ .....ଭୂବନେଶ୍ୱର..... ଦଳ ଦ୍ୱାରା ସମର୍ଥତ/ମୁଁ ପୁନଶ୍ଚ ଘୋଷଣା କରୁଅଛି ଯେ ମୁଁ ଏହି ନିର୍ବାଚନ ପାଇଁ ସ୍ୱାଧୀନ ପ୍ରାର୍ଥୀ ରୂପେ ପ୍ରତିଦ୍ୱନ୍ଦ୍ୱିତା କରିବାକୁ ଚାହେଁ । (ବି.ବ୍ର.-ଅନାବଶ୍ୟକ ଅଂଶକୁ କାଟି ଦିଅନ୍ତୁ ) ।

ମୁଁ ପୁନଶ୍ଚ ଘୋଷଣା କରୁଅଛି ଯେ ମୁଁ ନିର୍ବାଚନରେ ଭାଗ ନେବା ପାଇଁ ଯୋଗ୍ୟ ଏବଂ ଓଡ଼ିଶା ମ୍ୟୁନିସିପାଲ ଅଧିନିୟମ, 1950ର କୌଣସି ଧାରାରେ .....ଅନାବଦ..... ପୌର ପରିଷଦ/ଅଧିକୃତ କ୍ଷେତ୍ର ପରିଷଦ ଅନ୍ତର୍ଗତ .....୨..... ଓଡ଼ିଶା ସରକାର ପଦବୀ ପୂରଣ ପାଇଁ ଅଯୋଗ୍ୟ ନୁହେଁ ।

ଭୂବନେଶ୍ୱର  
ପ୍ରାର୍ଥୀଙ୍କ ସ୍ୱାକ୍ଷର

ନିର୍ବାଚନ ଅଧିକାରୀ/ଅନ୍ୟ ପ୍ରାଧିକୃତ ଅଧିକାରୀଙ୍କ ନିମନ୍ତେ ଉଦ୍ଦିଷ୍ଟ

ମନୋନୟନ ପତ୍ରର କ୍ରମିକ ସଂଖ୍ୟା .....୪୫.....

ଏହି ମନୋନୟନ ପତ୍ର ମୋ ନିକଟରେ .....ଭୂବନେଶ୍ୱର..... କ ଦ୍ୱାରା  
.....୦୭.୦୩.୨୨..... ତାରିଖ .....୦୨.୩୮..... ମାସରେ ଦାଖଲ କରାଗଲା ।

[Signature]  
ନିର୍ବାଚନ ଅଧିକାରୀ/

ପ୍ରାଧିକୃତ ଅଧିକାରୀଙ୍କ ସ୍ୱାକ୍ଷର  
ନିର୍ବାଚନ ଅଧିକାରୀ  
ପୌର ପରିଷଦ, ବରଗଡ଼

ମନୋନୟନ ପତ୍ର ଯାଞ୍ଚ ପରେ ନିଷ୍ପତ୍ତି :

ନିର୍ବାଚନ ଅଧିକାରୀଙ୍କ ସ୍ୱାକ୍ଷର

-----Perforation-----

C-78

ଫାରମ VIII  
[ ନିୟମ 25 (I) ଦ୍ରଷ୍ଟବ୍ୟ ]

ମନୋନୟନ ପତ୍ର

- 1. ଡାକ୍ତର ସଂଖ୍ୟା ବା ନାମ : **ଡ୍ରାଡ଼ିଟ୍-୨**  
ଯାହା ପାଇଁ ପ୍ରାର୍ଥୀ ମନୋନୀତ ହୋଇଛନ୍ତି  
( ସଂରକ୍ଷିତ ପଦବୀ ପାଇଁ ମନୋନୟନ  
ଯଦି ଥାଏ ଉଲ୍ଲେଖ କରନ୍ତୁ ) ।
- 2. ପ୍ରାର୍ଥୀଙ୍କ ପୁରା ନାମ : **କୁଦ୍ୟାଲ୍ଲା ସେଠ**
- 3. ଭୋଟର ତାଲିକାରେ ପ୍ରାର୍ଥୀଙ୍କ କ୍ରମିକ ସଂଖ୍ୟା : **୪୫୬ , ବ୍ଲକ୍-୮, ଡ୍ରାଡ଼ିଟ୍-୨**
- 4. ସ୍ତ୍ରୀ ବା ସ୍ୱାମୀଙ୍କ ନାମ : **ମରହୁଣୀ ସେଠ**
- 5. ବୟସ : **୩୩ ବର୍ଷ**
- 6. ଠିକଣା : **ଡ୍ରାଡ଼ିଟ୍-୨, ଦୟାଗଡ଼  
ଘୋ/ଧାନ୍ୟା/ଦୟାଗଡ଼/ଜିଲ୍ଲା-ଦୟାଗଡ଼  
ଫିଲ୍ ନୋମ୍ବର - ୧୨୮୦୨୮**
- 7. ଗୋଷ୍ଠୀ :
- 8. ପ୍ରସ୍ତାବକଙ୍କ ପୁରା ନାମ : **ମରହୁଣୀ ସେଠ**
- 9. ଭୋଟର ତାଲିକାରେ ପ୍ରସ୍ତାବକଙ୍କ କ୍ରମିକ ସଂଖ୍ୟା : **୪୫୫ , ବ୍ଲକ୍-୮, ଡ୍ରାଡ଼ିଟ୍-୨**
- 10. ପ୍ରସ୍ତାବକଙ୍କ ସ୍ୱାକ୍ଷର : **Mahesh Seth**
- 11. ସମର୍ଥକଙ୍କ ପୁରା ନାମ :
- 12. ଭୋଟର ତାଲିକାରେ ସମର୍ଥକଙ୍କ କ୍ରମିକ ସଂଖ୍ୟା : **୪୫୭ , ବ୍ଲକ୍-୮, ଡ୍ରାଡ଼ିଟ୍-୨**
- 13. ସମର୍ଥକଙ୍କ ସ୍ୱାକ୍ଷର : **ବିହେନ ଘୋର**
- 14. ପ୍ରାର୍ଥୀଙ୍କ ଦ୍ୱାରା ସ୍ଥିରୀକୃତ ନିର୍ବାଚନ ସଂକେତ : **ହାତ ନିମ୍ନ**

Perforation

ଅପର ପୃଷ୍ଠା ଦେଖନ୍ତୁ



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Date 6/3/22

**AFFIDAVIT TO BE FILED BY THE CANDIDATE ALONGWITH NOMINATION PAPER TO THE ELECTION OFFICER /RETURNING OFFICER FOR ELECTION TO OFFICE OF**

Ward No. 02 of BARGARH NAC/Municipality/Municipal Corporation for the office of Councillor /Corporator/

OR \_\_\_\_\_ NAC/Municipality/Municipal Corporation for the office of Chairperson/Mayor

(strike out whichever is not applicable)

I, Trutya Seth son/daughter/wife of mahesh Seth Aged 33 years, resident of ward NO-02, Bargarh (mention full postal address), a candidate at the above election, do hereby solemnly affirm and state on oath as under:-

(1) I am a candidate set up by Indian National Congress (name of the political party) / am contesting as an Independent candidate. (strike out whichever is not applicable)

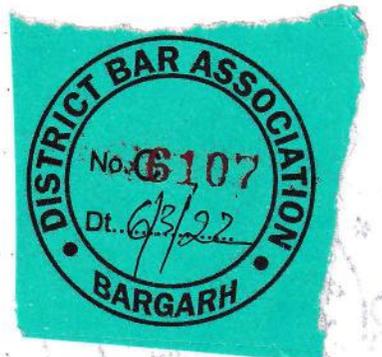
(2) My name is enrolled in BARGARH (Name of the Ward No. 02 Municipality/ Municipal Corporation), at Serial No. 556 in Booth No. 08

(3) My contact telephone number(s) is/are \_\_\_\_\_ and my e-mail id (if any) is \_\_\_\_\_ and my social media account(s) (if any) is/are \_\_\_\_\_

(i) \_\_\_\_\_  
(ii) \_\_\_\_\_



6/3/22



**(4) Details of Permanent Account Number (PAN) and status of filing of Income tax return:**

Sl. No.	Names	PAN	The financial year for which the last Income-tax return has been filed	Total income shown in Income Tax Return (in Rupees) for the last five Financial Years completed (as on 31 <sup>st</sup> March)
1.	Self TRUTIYA SETH	HHVPS 6606F	NIL	(i) NIL (ii) NIL (iii) NIL (iv) NIL (v) NIL
2.	Spouse	NIL	NIL	(i) NIL (ii) NIL (iii) NIL (iv) NIL (v) NIL
3.	HUF (If Candidate is Karta/Coparcener)	NIL	NIL	(i) NIL (ii) NIL (iii) NIL (iv) NIL (v) NIL
4.	Dependent 1	NIL	NIL	(i) NIL (ii) NIL (iii) NIL (iv) NIL (v) NIL



5.	Dependent 2			(i)	NIL
				(ii)	NIL
				(iii)	NIL
				(iv)	NIL
				(v)	NIL
6.	Dependent 3...			(i)	NIL
				(ii)	NIL
				(iii)	NIL
				(iv)	NIL
				(v)	NIL

Note: It is mandatory for PAN holder to mention PAN and in case of no PAN, it should be clearly stated "No PAN allotted". PAN NO - MHVPS 6606F

**(5) Pending criminal cases**

(i) I declare that there is no pending criminal case against me.

(Tick this alternative if there is no criminal case pending against the Candidate and write NOT APPLICABLE against alternative (ii) below)

OR NA

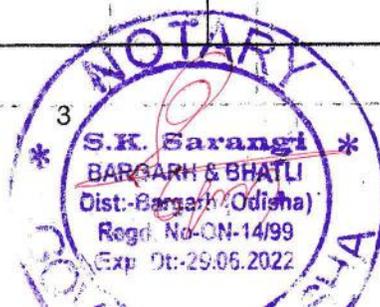
(ii) The following criminal cases are pending against me:

(If there are pending criminal cases against the candidate, then tick this alternative and score off alternative (i) above, and give details of all pending cases in the Table below)

Table

(a)	FIR No. with name and address of Police Station concerned	NIL	NIL	NIL

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b)	Case No. with Name of the Court	NIL	NIL	NIL
c)	Section(s) of concerned Acts/Codes involved (give no. of the Section, e.g. Section.....of IPC, etc.).	NIL	NIL	NIL
d)	Brief description of offence	NIL	NIL	NIL
e)	Whether charges have been framed (mention YES or NO)	NIL	NIL	NIL
f)	If answer against (e) above is YES, then give the date on which charges were framed	NIL	NIL	NIL
g)	Whether any Appeal/Application for revision has been filed against the proceedings (Mention YES or NO)	NIL	NIL	NIL

**(6) Cases of conviction**

(i) I declare that I have not been convicted for any criminal offence.

(Tick this alternative, if the candidate has not been convicted and write NOT APPLICABLE against alternative (ii) below)

OR NA

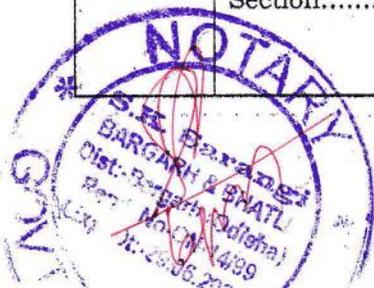
(ii) I have been convicted for the offences mentioned below:

(If the candidate has been convicted, then tick this alternative and score off alternative

(i) above, and give details in the Table below)

**Table**

(a)	Case No.	NIL	NIL	NIL
(b)	Name of the Court	NIL	NIL	NIL
(c)	Sections of Acts/Codes involved (give no. of the Section, e.g. Section..... of IPC, etc.).	NIL	NIL	NIL



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(d)	Brief description of offence for which convicted	NIL	NIL	NIL
(e)	Dates of orders of conviction	NIL	NIL	NIL
(f)	Punishment imposed(indicate period of imprisonment awarded and/or quantum of the fine imposed)	NIL	NIL	NIL
(g)	Whether any Appeal has been filed against conviction order (Mention YES or No) Repeat the above sequence in respect of each separate case of conviction.	NIL	NIL	NIL
(h)	If answer to (g) above is YES, give details and present status of appeal	NIL	NIL	NIL
(i)	Discharged /acquitted in the cases(s) Section of the Act and description of the offence	NIL	NIL	NIL
(j)	The Court Which had taken cognizance	NIL	NIL	NIL
(k)	Case No	NIL	NIL	NIL
(l)	Details of Appeal/application for revision etc. if any filed against above order taking cognizance	NIL	NIL	NIL
(m)	Cases(s) is/ are pending against me which cognizance has been taken by Court Section Act and Description of the offence for which cognizance	NIL	NIL	NIL
(n)	The Court Which had taken cognizance	NIL	NIL	NIL
(o)	Case No	NIL	NIL	NIL



(p)	Details of Appeal/application for revision etc. if any filed against above order taking cognizance	NIL	NIL	NIL
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1. Details should be given in reverse chronological order, i.e., the latest case to be mentioned first and backwards in the order of dates for the other cases.
2. Additional sheet may be added if required.

(7) That I give herein below the details of the assets (movable and immovable etc.) of myself, my spouse and all dependents:

**A. Details of movable assets :**

Note: 1. Assets in joint name indicating the extent of joint ownership will also have to be given.

Note: 2. In case of deposit/Investment, the details including Serial Number, Amount, date of deposit, the scheme, Name of Bank/Institution and Branch are to be given.

Note: 3. Value of Bonds/Share Debentures as per the current market value in Stock Exchange in respect of listed companies and as per books in case of non-listed companies should be given.

Note: 4. 'Dependent' means parents, son(s), daughter(s) of the candidate or spouse and any other person related to the candidate whether by blood or marriage, who have no separate means of income and who are dependent on the candidate for their livelihood.

Note: 5. Details including amount is to be given separately in respect of each investment

Note: 6. Details should include the interest in or ownership.

**Explanation,- For the purpose of this Form, the expression " includes, details of all deposits or investments ;**

S. No.	Description	Self	Spouse	HUF	Dependent -1	Dependent -2	Dependent -3
(i)	Cash in hand	5000/-	NIL	NIL	NIL	NIL	NIL



ॐ नमो भगवते वासुदेवाय

ii)	Details of deposit in Bank accounts (FDRs, Term Deposits and all other types of deposits including saving accounts), Deposits with Financial Institutions, Post Office/Current Accounts, Non-Banking Financial Companies and Cooperative societies and the amount in each such deposit	INDIAN BANK BARBARH AFCNO - 65 912 53624 Re 9402/-	NIL	NIL	NIL	NIL	NIL
(iii)	Details of investment in Bonds, Debentures/Shares and units in companies/Mutual Funds and others and the amount.		NIL	NIL	NIL	NIL	NIL
(iv)	Details of investment in NSS, Postal Saving, Insurance Policies and investment in any Financial instruments in Post office or Insurance Company and the amount		NIL	NIL	NIL	NIL	NIL
(v)	Personal loans/advance given to any person or entity including firm, company, Trust etc. and other receivables from debtors and the amount.		NIL	NIL	NIL	NIL	NIL
(vi)	Motor Vehicles such as Jeep, Cars Bus, Trucks Heavy Vehicles (Details of Make, registration number, etc. year of purchase and amount ) with approx. present market value according to you		NIL	NIL	NIL	NIL	NIL
(vii)	Jewellery, Gold, Gold Ornaments Silver and Silver Ornaments valuable thing(s) (give details of weight and value) with approx. present market value according to you	15gm Gold	NIL	NIL	NIL	NIL	NIL
(viii)	Any other assets such as value of claims/interest		NIL	NIL	NIL	NIL	NIL
(ix)	Gross Total value	48000/-	NIL	NIL	NIL	NIL	NIL



**(8) Details of Immovable assets:**

Note: 1. Properties in joint ownership indicating the extent of joint ownership will also have to be indicated

Note: 2. Each land or building or apartment should be mentioned separately in this format

Note: 3. Details should include the interest in or ownership of assets.

Sl. No	Description	Self	Spouse	HUF	Dependent-1	Dependent-2	Dependent-3
(i)	<u>Agricultural Land</u>						
	Location(s) Survey number(s)	NIL	NIL	NIL	NIL	NIL	NIL
	Area (total measurement in acres)	NIL	NIL	NIL	NIL	NIL	NIL
	Whether inherited property (Yes or No)	NIL	NIL	NIL	NIL	NIL	NIL
	Date of purchase in case of self - acquired property	NIL	NIL	NIL	NIL	NIL	NIL
	Cost of Land (in case of purchase) at the time of purchase	NIL	NIL	NIL	NIL	NIL	NIL
	Any Investment on the land by way of development, construction etc.	NIL	NIL	NIL	NIL	NIL	NIL
	Approximate Current market value	NIL	NIL	NIL	NIL	NIL	NIL
(ii)	<u>Non-Agricultural Land</u>						
	Location(s) Survey number(s)	NIL	NIL	NIL	NIL	NIL	NIL
	Area (total measurement in sq. ft.)	NIL	NIL	NIL	NIL	NIL	NIL
	Whether inherited property (Yes or No)	NIL	NIL	NIL	NIL	NIL	NIL
	Date of purchase in case of self - acquired property	NIL	NIL	NIL	NIL	NIL	NIL
	Cost of Land (in case of purchase) at the time of purchase	NIL	NIL	NIL	NIL	NIL	NIL



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	Any Investment on the land by way of development, construction etc.	NIL	NIL	NIL	NIL	NIL	NIL
	Approximate current market value	NIL	NIL	NIL	NIL	NIL	NIL
(iii)	<u>Commercial Buildings</u> (including apartments) -Location(s) -Survey number(s)	NIL	NIL	NIL	NIL	NIL	NIL
	Area (total measurement in sq. ft.)	NIL	NIL	NIL	NIL	NIL	NIL
	Built-up Area (total measurement in sq.ft.)	NIL	NIL	NIL	NIL	NIL	NIL
	Whether inherited property (Yes or No)	NIL	NIL	NIL	NIL	NIL	NIL
	Date of purchase in case of self - acquired property	NIL	NIL	NIL	NIL	NIL	NIL
	Cost of property (in case of purchase) at the time of purchase	NIL	NIL	NIL	NIL	NIL	NIL
	Any Investment on the property by way of development, construction etc.	NIL	NIL	NIL	NIL	NIL	NIL
	Approximate current market value	NIL	NIL	NIL	NIL	NIL	NIL
(iv)	<u>Residential Buildings</u> (including apartments): -Location (s) -Survey number(s)	NIL	NIL	NIL	NIL	NIL	NIL
	Area (Total measurement in sq. ft)	NIL	NIL	NIL	NIL	NIL	NIL
	Built up Area (Total measurement in sq. ft.)	NIL	NIL	NIL	NIL	NIL	NIL
	Whether inherited property (Yes or No)	NIL	NIL	NIL	NIL	NIL	NIL
	Date of purchase in case of self - acquired property	NIL	NIL	NIL	NIL	NIL	NIL

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	Cost of property (in case of purchase) at the time of purchase	NIL	NIL	NIL	NIL	NIL	NIL
	Any Investment on the land by way of development, construction etc.	NIL	NIL	NIL	NIL	NIL	NIL
	Approximate current market value	NIL	NIL	NIL	NIL	NIL	NIL
(v)	Others (such as interest in property)	NIL	NIL	NIL	NIL	NIL	NIL
(vi)	Total of current market value of (i) to (v) above	NIL	NIL	NIL	NIL	NIL	NIL

(9) Give herein below the details of liabilities/dues to public financial institutions and government:-

(Note: Please give separate details of name of bank, institution, entity or individual and amount before each item)

S. No.	Description	Self	Spouse	HUF	Dependent-1	Dependent-2	Dependent-3
(i)	<b>Loan or dues to Bank/Financial Institution(s)</b> Name of Bank or Financial Institution, Amount outstanding, Nature of loan	NIL	NIL	NIL	NIL	NIL	NIL
	<b>Loan or dues to any other individuals/entity other than mentioned above.</b> Name(s), Amount outstanding, nature of loan	NIL	NIL	NIL	NIL	NIL	NIL
	<b>Any other liability</b>	NIL	NIL	NIL	NIL	NIL	NIL
	<b>Grand total of liabilities</b>	NIL	NIL	NIL	NIL	NIL	NIL



2022/06/29

**(10) Details of profession or occupation:**

- (a) Self..... Housewife.....
- (b) Spouse ... Bushen.....

**(10A) Details of source(s) of income:**

- (a) Self... Housewife
- (b) Spouse Bushen.....

(C) Source of income, if any, of dependents,..... Nil.....

**(10B) Contracts with appropriate Government and any public company or companies**

- (a) details of contracts entered by the candidate..... NO...
- (b) details of contracts entered into by spouse .... NO.....
- (c) details of contracts entered into by dependents ... NO.....
- (d) details of contracts entered into by Hindu Undivided Family or trust in which the candidate or spouse or dependents have interest ..... Nil.....
- (e) details of contracts, entered into by Partnership Firms in which candidate or spouse or dependents are partners ..... NO.....
- (f) details of contracts, entered into by private companies in which candidate or spouse or dependents have share ..... NO.....

**(11). My educational qualification is as under:**

7<sup>th</sup> pass, Municipality grade High school, Bargarh

(Give details of highest School / University education mentioning the full form of the certificate/ diploma/ degree course, name of the School /College/ University and the year in which the course was completed.)

**VERIFICATION**

I, the deponent, above named, do hereby verify and declare that the contents of this affidavit are true and correct to the best of my knowledge and belief and no part of it is false and nothing material has been concealed there from. I further declare that:-

- (a) there is no case of conviction or pending case against me other than those mentioned in items 5 and 6 of Part A and B above;
- (b) I, my spouse, or my dependents do not have any asset or liability, other than those mentioned in items 7 and 8, 9 above.

Verified at Bargarh this the 6<sup>th</sup> day of March 2022

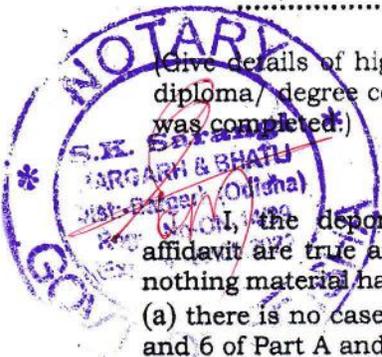
Witnesses:

- 1.
- 2.

*[Signature]*  
**S.K. Sarangi**  
 NOTARY, Bargarh & Bhatli  
 Dist- Bargarh (Odisha)  
 Regd. No-ON-14/99  
 Exp. Dt.-29.06.2022

*[Signature]*  
**DEPONENT**

*[Signature]*



**Note:** 1. Affidavit should be filed latest by 3.00 PM on the last day of filing nominations.

**Note:** 2. Affidavit should be sworn before an Oath Commissioner or Magistrate of, the First Class or before a Notary Public or Executive Magistrate.

**Note:** 3. All columns should be filled up and no column to be left blank. If there is no information to furnish in respect of any item, either "Nil" or "Not applicable", as the case may be, should be mentioned.

**Note:** 4. The affidavit should be either typed or written legibly and neatly.

**Note:** 5. Each page of the Affidavit should be signed by the deponent and the Affidavit should bear on each page the stamp of the Notary or Oath Commissioner or Magistrate of the First Class or Executive Magistrate before whom the Affidavit is sworn.

ଫାରମ IX

[ ନିୟମ 25 ଟିସିଏ-1 ଦ୍ରଷ୍ଟବ୍ୟ ]

ରାଜନୈତିକ ଦଳ ଦ୍ଵାରା ସମର୍ଥତ ପ୍ରାର୍ଥୀଙ୍କ ନାମ ଜଣାଇବା ନିମନ୍ତେ ପ୍ରାଧିକୃତ ବ୍ୟକ୍ତି

ପ୍ରାପକ,

ନିର୍ବାଚନ ଅଧିକାରୀ ..... ପୌରପାଳିକା

ବିଷୟ : ..... ପୌର ପରିଷଦର ସଭ୍ୟପଦ ନିର୍ମୂଳ ସାଧାରଣ ନିର୍ବାଚନ ।

ସଙ୍କେତ ଆବେଦନ ଓ ଦଳୀୟ ପ୍ରାର୍ଥୀମାନଙ୍କ ନାମ ଜଣାଇବା ନିମିତ୍ତ ପ୍ରାଧିକୃତ ବ୍ୟକ୍ତି ବା ବ୍ୟକ୍ତିବୃନ୍ଦ ।

ମହାଶୟ,

ଓଡ଼ିଶା ମ୍ୟୁନିସିପାଲ (ଓ୍ଵାର୍ଡଗୁଡ଼ିକର ସାନି ସୀମା ନିର୍ଦ୍ଧାରଣ, ଆସନ ଆରକ୍ଷଣ ଏବଂ ନିର୍ବାଚନ ପରିଚାଳନା) ନିୟମାବଳୀ, 1994ର ନିୟମ 25 (8) ଅନୁଯାୟୀ ମୁଁ ଏତଦ୍ଵାରା ଜଣାଉଅଛି ଯେ ନିମ୍ନଲିଖିତ ବ୍ୟକ୍ତି/ବ୍ୟକ୍ତିମାନେ ଉପରୋକ୍ତ ନିର୍ବାଚନରେ ଆମ୍ଭ ଦଳର ପ୍ରାର୍ଥୀଙ୍କ ନାମସୁପାରିଶ କରିବା ପାଇଁ ପ୍ରାଧିକୃତ ହୋଇଛନ୍ତି ଏବଂ ଏହି ଦଳ ଏକ \*ଜାତୀୟ/..... ରାଜ୍ୟର ରାଜ୍ୟ ସ୍ତରୀୟ/ପଞ୍ଜୀକୃତ ଅଣସ୍ଵୀକୃତ ରାଜନୈତିକ ଦଳ ।

ନୋଟିସ୍ ପ୍ରେରଣ କରିବା ନିମିତ୍ତ ପ୍ରାଧିକୃତ ବ୍ୟକ୍ତିଙ୍କ ନାମ	ଦଳରେ ଅଧିଷ୍ଠିତ ହୋଇଥିବା ପଦବୀର ନାମ	କେଉଁ ଜିଲ୍ଲା/ଅଞ୍ଚଳ/ପୌରପାଳିକା ପାଇଁ ପ୍ରାଧିକୃତ
1	2	3
1.		
2.		
3.		

2. ଉପରୋକ୍ତ ପ୍ରାଧିକୃତ ବ୍ୟକ୍ତିଙ୍କର ନମୁନା ସ୍ଵାକ୍ଷର ନିମ୍ନରେ ପ୍ରଦତ୍ତ ହେଲା :

- ଶ୍ରୀ ..... କର ନମୁନା ସ୍ଵାକ୍ଷର  
(i) \_\_\_\_\_ (ii) \_\_\_\_\_ (iii) \_\_\_\_\_
- ଶ୍ରୀ ..... କର ନମୁନା ସ୍ଵାକ୍ଷର  
(i) \_\_\_\_\_ (ii) \_\_\_\_\_ (iii) \_\_\_\_\_
- ଶ୍ରୀ ..... କର ନମୁନା ସ୍ଵାକ୍ଷର  
(i) \_\_\_\_\_ (ii) \_\_\_\_\_ (iii) \_\_\_\_\_

ଆପଣଙ୍କର ବିଶ୍ଵସ୍ତ

ସ୍ଥାନ .....

ତାରିଖ .....

ରାଜନୈତିକ ଦଳର ରାଜ୍ୟ ସ୍ତରୀୟ ସଂଗଠନର ଅଧ୍ୟକ୍ଷ/  
ସଂପାଦକଙ୍କ ସ୍ଵାକ୍ଷର,  
ଦଳର ନାମ .....  
ଦଳର ମୋହର .....

ବି.ଦ୍ଵ. :- ମନୋନୟନ ପତ୍ର ଯାଞ୍ଚ ନିମନ୍ତେ ଧାର୍ଯ୍ୟ ତାରିଖର ଅନୁ୍ୟନ ଦୁଇଦିନ ପୂର୍ବରୁ ଅପରାହ୍ଣ ୫ ଘଟିକା ମଧ୍ୟରେ ଏହା ନିର୍ବାଚନ ଅଧିକାରୀଙ୍କ ନିକଟରେ ନିଶ୍ଚିତ ପହଞ୍ଚିବା ଆବଶ୍ୟକ । ପର୍ଯ୍ୟନ୍ତ କାଳରେ ସ୍ଵାକ୍ଷରିତ (ink signed) ନିଶ୍ଚୟ ହେବ । କୌଣସି ପାସିମାଲ୍ଲ ବା ରବର ସ୍ଵାକ୍ଷର ଦସ୍ତଖତ ଗ୍ରହଣୀୟ ହେବ ନାହିଁ । ପାଞ୍ଜ ମାଧ୍ୟମରେ ପ୍ରେରିତ ପର୍ଯ୍ୟନ୍ତ ଗ୍ରହଣୀୟ ହେବ ନାହିଁ ।

\*ପ୍ରମୁଖ୍ୟ ହେଉ ନ ଥିବା ଅଂଶ କାଟି ଦିଅନ୍ତୁ ।

ଫାରମ X

[ ନିୟମ 25 ଟିସିଏ-1 ଦ୍ରଷ୍ଟବ୍ୟ ]

ରାଜନୈତିକ ଦଳ ଦ୍ୱାରା ସମର୍ଥତ ପ୍ରାର୍ଥୀମାନଙ୍କର ନାମ ସମ୍ପର୍କରେ ନୋଟିସ୍

ପ୍ରାପକ,

ନିର୍ବାଚନ ଅଧିକାରୀ ..... ଯୌର ପାଳିକା

ବିଷୟ : ..... ଯୌର ପରିଷଦ ସାଧାରଣ ନିର୍ବାଚନ ନିମନ୍ତେ ପ୍ରାର୍ଥୀ ଚୟନ ସମ୍ପର୍କରେ ।

ମହାଶୟ,

ଓଡ଼ିଶା ମ୍ୟୁନିସିପାଲ (ଡ୍ୱାର୍ଡଗୁଡିକର ସାନି ସୀମା ନିର୍ଦ୍ଧାରଣ, ଆସନ ଆରକ୍ଷଣ ଏବଂ ନିର୍ବାଚନ ପରିଚାଳନା) ନିୟମାବଳୀ, 1994ର ନିୟମ 25 (8) ଅନୁଯାୟୀ ମୁଁ ନୋଟିସ୍ ଦେଉଅଛି ଯେ ନିମ୍ନଲିଖିତ ବ୍ୟକ୍ତି ..... ଦଳଦ୍ୱାରା ..... ଯୌର ପରିଷଦର ଆସନ ସାଧାରଣ ନିର୍ବାଚନରେ ଦଳୀୟ ପ୍ରାର୍ଥୀ ରୂପେ ସମର୍ଥତ ହୋଇଛନ୍ତି ।

କ୍ରମିକ ସଂଖ୍ୟା	ଯୌର ପାଳିକାର ନାମ	ଅନୁମୋଦିତ ପ୍ରାର୍ଥୀଙ୍କ ନାମ ( ଡ୍ୱାର୍ଡ ଡ୍ୱାରୀ )	ଅନୁମୋଦିତ ପ୍ରାର୍ଥୀଙ୍କ ପିତା/ସ୍ୱାମୀଙ୍କ ନାମ	ଅନୁମୋଦିତ ପ୍ରାର୍ଥୀଙ୍କ ଡାକ ଠିକଣା
1	2	3	4	5

ଆପଣଙ୍କର ବିଶ୍ୱସ୍ତ

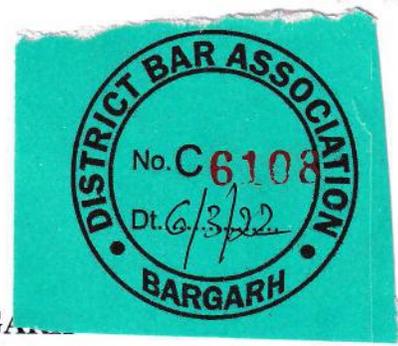
ସ୍ଥାନ .....

ତାରିଖ .....

ରାଜ୍ୟସ୍ତରୀୟ ସଂଗଠନର ଅଧ୍ୟକ୍ଷ  
କିମ୍ବା ସମ୍ପାଦକ/ରାଜନୈତିକ ଦଳ ଦ୍ୱାରା  
ଫାରମ IXରେ ଦିଆଯାଇଥିବା  
ପ୍ରାୟୁକୃତ ଅଧିକାରୀଙ୍କ ନାମ ଓ ସ୍ୱାକ୍ଷର  
ଦଳର ନାମ .....  
( ଦଳର ମୋହର )

ବି.ଦ୍ର. : ମନୋନୟନ ପତ୍ର ଯାଞ୍ଚ ନିମନ୍ତେ ଧାର୍ଯ୍ୟ ତାରିଖର ଅଧିକାରୀଙ୍କୁ ଏକଦିନ ପୂର୍ବରୁ ଅପରାହ୍ଣ ୫ ଘଟିକା ମଧ୍ୟରେ ଏହା ନିର୍ବାଚନ ଅଧିକାରୀଙ୍କ ନିକଟରେ ନିଶ୍ଚିତ ପହଞ୍ଚିବା ଆବଶ୍ୟକ । ଫର୍ମଟି କାଳିରେ ସ୍ୱାକ୍ଷରିତ (ink signed) ନିଶ୍ଚୟ ହେବ । କୌଣସି ପାସିମାଇଲ ବା ରବର ସ୍ୱାକ୍ଷର ଦସ୍ତଖତ ଗ୍ରହଣୀୟ ହେବ ନାହିଁ । ପାଠ୍ୟ ମାଧ୍ୟମରେ ପ୍ରେରିତ ଫର୍ମ ଗ୍ରହଣୀୟ ହେବ ନାହିଁ ।

Sl No. 189  
Date 6/3/2022



SWORN BEFORE THE NOTARY PUBLIC, BARGARH

I Poojya Seth ..... S/o / D/o / W/o Makeeh Seth .....

aged about 33 ..... years, occupation Home wife ..... R/o W.No 02 .....

BARGARH, Po/Ps/Dist – BARGARH do hereby solemnly affirm and state as follows;

- 1- That, I am the permanent resident of the above mentioned address.
- 2- That, I hereby declare that I do not have more than two children or not more than one spouse living.
- 3- That, I swear this affidavit to procedure before the Election Commissioner Odisha for the purpose of contesting in Municipal Council Election - 2022.
- 4- That, the contents of this affidavit from para-1 to para-3 are all true to the best of my knowledge and belief.



ପୁଜ୍ୟ ସେଠ  
DEPONENT

The above named deponent being identified by B. Sarangi Advocate, appeared before me on this 6th day of March at AM/PM Bargarh  
S.K. Sarangi  
S.K. Sarangi, NOTARY  
Bargarh & Bhatu, Dist: Bargarh  
Regd. No-ON-14/99, Exp. Dt-29.06.2022

Identified by me  
[Signature]  
Advocate, Bargarh

ପୁଜ୍ୟ ସେଠ



FORM No. I

(See Rule 3)

**GOVERNMENT OF ODISHA**

Office of the Tahasildar **Bargarh**

Miscellaneous Certificate Case No **E-SCO/2022/94115**

**SCHEDULED CASTE CERTIFICATE**

This is to certify that Smt **TRUTIYA SETH** daughter of Smt **LATE PREMASILA SETH** and Shri **CHALU SETH**, wife of Shri **MAHESH SETH** of village/town **BARGARH P.S BARGARH** in the district **BARGARH** in the state of Odisha belongs to **Dhoba** caste which is recognized as **Scheduled Caste** under the constitution (scheduled Caste / Scheduled Tribe) order 1950 as amended by the scheduled Caste and Scheduled Tribe List (Modification) order 1956 and Scheduled Caste and Scheduled Tribe Order (Amendment) Act, 1976.

Smt **TRUTIYA SETH** and her family ordinarily reside(s) in village/town **BARGARH** of **BARGARH** district in the state of Odisha.



Digitally signed by SANJIB KUMAR MEHER

Date: 2022.03.07 10:39:35 +05:30

Signature of the Revenue Officer

07/03/2022

\*\*\*\* This is a Digitally Signed Document And Does Not Require Signature \*\*\*\*

**NOTE**

- (i) It is a digitally signed electronically generated certificate and therefore needs no ink-signed signature.
- (ii) This Certificate is issued as per section 4, 5, & 6 of Information Technology Act 2000 and its subsequent amendments in 2008 and as per Revenue & Disaster Management Department Notification number IMU-13/10-4251/R&DM.
- (iii) For any Query or Verification, Agency /Department / Office may visit <https://edistrict.odisha.gov.in>
- (iv) Tampering of this Certificate will attract penal action.



HOUSING AND URBAN DEVELOPMENT DEPARTMENT  
**OFFICE OF THE MUNICIPAL COUNCIL : BARGARH**  
AT/PO/DIST.-BARGARH, PIN-768028



Date: 06-03-22

**NO DUES CERTIFICATE**

This is to certify that **No Dues** of Bargarh Municipality is outstanding against **Smt. Trutiya Seth W/o Mahesh Seth** of W.N.02 Bargarh.

This certificate is being issued for the purpose of filing nomination for ensuing general election to Bargarh Municipality.

*Sd/-*  
**Executive Officer**  
**Bargarh Municipality**

**Memo No. 1203 /Dt. 06-03-22**

Copy to **Smt. Trutiya Seth** of W.N.02 Bargarh for information and necessary action with reference to her application dt.06.03.2022.

*[Signature]*  
**Executive Officer**  
**Bargarh Municipality**

*6/3/22*

Form IX  
[ See Rule 25 Note I ]

Communication with regard to authorized persons to intimate names of candidates sponsored by the Political Party.

To  
The Election Officer ..... Bargarh ..... Municipality

SUBJECT: General Elections of Chairperson / Councilors to ..... Bargarh ..... Municipal Council - Allotment of Symbols – Authorisation of persons to intimate names of candidates.

Sir,

In pursuance of Rule 25 (8) of the Odisha Municipal (Delimitation of Wards, Reservation of Seats and Conduct of Election) Rules, 1994, I hereby intimate that the following person(s) has / have been authorised by the party, which is a National Party / State Party in the State of ... Odisha ..... / Registered unrecognised party, to intimate the names of the candidates proposed to be sponsored by the party for the Election cited above-

Name of person authorised to send notice (1)	Name of office held in the party (2)	District (s) / Area (s) Municipalities in respect of which he has been authorised (3)
<b>Shri Niranjan Patnaik</b>	<b>President</b>	<b>For all Wards of NACs / Municipalities of the State</b>

2. The specimen signatures of the person(s) so authorised are given hereunder-

(1) Specimen Signatures of **Shri Niranjan Patnaik**

(i) [Signature] ..... (ii) [Signature] ..... (iii) [Signature] .....

(2) Specimen Signatures of **Shri Niranjan Patnaik**

(i) ..... (ii) ..... (iii) .....

(3) Specimen Signatures of **Shri Niranjan Patnaik**

(i) ..... (ii) ..... (iii) .....

Place: Bargarh .....

Date: 07/03/2022 .....

Yours faithfully

[Signature]  
President / Secretary  
of the State level

Organisation of the Political Party  
President  
Odisha Pradesh Congress Committee



Name of the Party  
(Seal of the Party)

“N.B.(1) This must be communicated to the Election Officer at least two days before the date fixed for scrutiny of nomination paper.

- (2) Form must be signed in ink by the office bearer(s) mentioned above. No facsimile signature or signature by means of rubber stamp, etc. shall be accepted.
- (3) No form transmitted by Fax shall be accepted.

Form X

[ See Rule 25 Note 1 & 43 (3) ]

Notice as to names of candidates sponsored by the political party

To

The Election Officer ..... Bargarh ..... Municipality

SUBJECT: General Election of Chairperson / Councilor to ..... Bargarh ..... Municipal Council- Sponsoring of candidates.

Sir,

In pursuance of Rule 25 (8) of the Odisha Municipal (Delimitation of Wards, Reservation of Seats and Conduct of Election) Rules, 1994, I hereby give notice that the following person has been sponsored by **Indian National Congress Party** as its candidate at the ensuing General / By-Election of Councillor to. W.No-2 Bargarh Municipal Council.

Sl. No.	Name of the Municipality	Name of the approved candidate	Father's / Husband's name of approved candidate	Postal address of approved candidate
1	2	3	4	5
	BARGARH	TRUTIYA SETH	MAHESH SETH	BARGARH TOWN W.No-2 BARGARH

Yours faithfully

  
(Niranjana Patnaik)  
(Name and signature of the President)

Place: Bargarh

Date: 07/03/22

or Secretary of the State Level Organisation of the Political Party or of the Office Bearer authorised in Form IX by the Political Party.)

**President**  
Odisha Pradesh Congress Committee



(Seal of the Party)

- N.B.- (1) This must be delivered to Election Officer at least one day before the date fixed for scrutiny of nomination papers.
- (2) Form must be signed in ink by office bearer(s) mentioned above. No facsimile signature or signature by means of rubber stamp, etc. shall be accepted.
- (3) No form transmitted by Fax shall be accepted.