


VERIFICATION

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

Verified atthis day* of 20.....


Signature of deponent

Note: "The columns in this Form which are not applicable to the deponent may be struck off."




TADIGIRI RAVI KUMAR
M.A., B.L.
Advocate & Notary
GUNTUR, A.P. INDIA

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H. Srinivas Rao
H. SRINIVASA RAO भारत 86276
S.V.L.NO. 12/94,R.L.NO. 269 124884
PEDAKAKANI
GUNTUR 16:14
LICENS ANNEXURE - I R.0000020 PB5384

GCP-833-23-02-2004-15,000

**AFFIDAVIT TO BE FURNISHED BY CANDIDATE ALONG WITH NOMINATION PAPER
 BEFORE THE RETURNING OFFICER**

for election to ANDHRA PRADESH STATE LEGISLATIVE ASSEMBLY
 (name of the House)
 from DONNUR constituency
 (name of the constituency)

I, NALUKURTI WILSON BABU, Son/Daughter/Wife of ANTHONY
 aged 45 years, resident of UPPALAPARU (PO) PEDAKAKANI (MD) GUNTUR (DT)

candidate at the above election, do hereby solemnly affirm and state on oath as under:—

(Strike out whichever not applicable)

(1) 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: NILL
- (ii) The Court which has taken cognizance: NILL
- (iii) Case No.: NILL
- (iv) Date of order of the Court taking cognizance: NILL
- (v) Details of appeal(s) / application(s) for revision, etc., if any, filed against above order taking cognizance:



- (2) That I give herein below the details of the assets (immovable, movable, bank balance, etc.) of spouse, my dependents and myself:

A. Details of Movable Assets:

(Assets in joint name indicating the extent of joint ownership will also have to be given)

S. No.	Description	Self	Spouse(s) Name(s):	Dependent-1 Name:	Dependent-2 Name:	Dependent-3, etc. Name:
(i)	Cash	40,000	UDAYA SREE	SON ANTHONY	DAUGHTER ANJALI	
(ii)	Deposits in Banks, Financial Institutions and Non-Banking Financial Companies	NILL	NILL	NILL	NILL	
(iii)	Bonds, Debentures and Shares in Companies	NILL	NILL	NILL	NILL	
(iv)	Other Financial instruments NSS, Postal Savings, LIC Policies, etc.	NILL	NILL	NILL	NILL	
(v)	Motor Vehicles (details of make, etc.)	4 WHEELER INDICA CAR	NILL	NILL	NILL	
(vi)	Jewellery (give details of weight and value)	40 GMS GOLD	NILL	NILL	NILL	
(vii)	Other Assets, such as values of claims/ interests	NILL	NILL	NILL	NILL	

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

*Dependent here means a person substantially dependents on the income of the candidate.



B. Details of Immovable Assets:

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

S. No.	Description	Self	Spouse(s) Name(s):	Dependent-1 Name:	Dependent-2 Name:	Dependent-3, etc. Name:
(i)	Agricultural Land - Location(s) - Survey Number(s) - Extent (Total measurement) - Current market value	NILL	NILL	NILL	NILL	
(ii)	Non-Agricultural Land - Location(s) - Survey Number(s) - Extent (Total measurement) - Current market value	NILL	NILL	NILL	NILL	
(iii)	Buildings (commercial and residential) - Location(s) - Survey / Door Number(s) - Extent (Total measurement) - Current market value	UPPAL- APADU, 4-201 10 CENTS 8,00,000/-	NILL	NILL	NILL	
(iv)	Houses / Apartments, etc. - Location(s) - Survey / Door Number(s) - Extent (Total measurement) - Current market value	Same as above	NILL	NILL	NILL	
(v)	Others (such as interest in property)	NILL	NILL	NILL	NILL	



(3) I give herein below the details of my liabilities / overdues to Public Financial Institutions and Government dues :-

(Note : Please give separate details for each item)

S.No.	Description	Name and address of Bank / Financial Institution (s) / Department (s)	Amount outstanding as on
(a) (i)	Loans from Banks		
(ii)	Loans from Financial Institutions		
(iii)	Government dues :-		
(a)	Dues to departments dealing with Government accommodation		
(b)	Dues to departments dealing with supply of water		
(c)	Dues to departments dealing with supply of electricity		
(d)	Dues to departments dealing with telephones		
(e)	Dues to departments dealing with government transport (including aircrafts and helicopters)		
(f)	Other dues if any		
S.No.	Description	Name and address of Bank / Financial Institution (s) / Department (s)	Amount outstanding as on
(b) (i)	Income Tax including surcharge [(Also indicate the assessment year upto which Income Tax Return filed. Give also Permanent Account Number (PAN)]		
(ii)	Wealth Tax (Also indicate the assessment year upto which Wealth Tax return filed.)		
(iii)	Sales Tax (Only in case of proprietary Business)		
(iv)	Property Tax		



(4) My educational qualifications are as under:—

(GIVE DETAILS OF SCHOOL AND UNIVERSITY EDUCATION)

(Name of School / University and the year in which the course was completed should also be given.)

1-5th CLASS - TAKKELAPADU, R.C.M. SCHOOL
S.S.C - YADAV HIGH SCHOOL, OLD GUNTUR

[Signature]
DEPONENT

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, no part of it is false and nothing material has been concealed therefrom.

Verified at this the day of 200.....

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[Signature]
DEPONENT



[Signature]
TADIGIRI RAVI KUMAR
M.A., B.L.
Advocate & Notary
GUNTUR A.P., INDIA

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FORM OF OATH OR AFFIRMATION

[ARTICLE 173 (A) OF THE CONSTITUTION OF INDIA]

(To be made by a candidate for election to the Legislature of a State)

I, Nalini Keesari Wilson Babu, having been nominated as a candidate to fill a seat in the 202 - Panchajanya Legislative Assembly (or Legislative Council) do swear in the name of the God / Solemnly affirm that I will bear true faith and allegiance to the constitution of India as by law established and that I will uphold the sovereignty and integrity of India.

Signature and name in block letters of the Candidate

Nalini Keesari Wilson

Sworn in the name of God/Solemnly affirmed by Shri/Shrimatiat Taluk Sahasrastra, Panchajanya (Place) at 1.55 P.M. (hour) this the 16.15 day of April, 200 9 before me.

Signature of authorized person
Name Designation and Seal

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1* FORM-2B

(SEE RULE 4)

Salu 1.50 pm
Kumar

NOMINATION PAPER

Election to the Legislative Assembly of ANDHRA PRADESH State.

STRIKE OFF PART I OR PART II BELOW WHICHEVER IS NOT APPLICABLE

PART I

(To be used by candidate set up by recognized political party)

I nominate as a candidate for Election to the Legislative Assembly from the
name Assembly Constituency. Candidate's
[Father's/mother's/husband's name]
address His postal

His name is entered at S.No in Part No..... of the electoral roll for
Assembly constituency. My name is
and it is entered at S. No..... in Part No..... of the
electoral roll for the Assembly constituency.

Date

Signature of the Proposer

PART II

(To be used by candidate NOT set up by recognized political party)

We hereby nominate as candidate for election to the Legislative Assembly from the
PONNUR Assembly Constituency.

Candidate's name NALUKURTI WILSON BABU Father's/ mother's / husband's name
ANTHONY His
address UPPALAPADU (PO) PEKAVAKAM (MD) GUNTUR (DT) His postal
Part No 47 of the electoral roll
for PONNUR Assembly Constituency.

We declare that we are electors of this Assembly Constituency and our names are entered in
the electoral roll for this Assembly Constituency as indicated below and we append our
signatures below in token of subscribing to this nomination:-

1* Substituted by Notification No. SO 558(E), dt. 9.8.1996.

PARTICULARS OF THE PROPOSERS AND THEIR SIGNATURES

Sl. No.	Electoral Roll No. of Proposer		Full Name	Signature	Date
	Part No. of Electoral Roll	S.No. in that part			
1	2	3	4	5	6
1.	44	855	KUCHIPUDI ROSAIAH	K. Rosaiah	4-4-09
2.	44	845	KUCHIPUDI SURESH	K. Suresh	4-4-09
3.	44	860	CHILAKA SUDHA RAO	S. Sudha Rao	4-4-09
4.	44	868	NEELAPATI BALA RAO	N. Balaram	4-4-09
5.	44	852	PERAVALI KISHORE	P. Kishore	4-4-09
6.	44	863	MANJOTOKA VERAIAH	M. V. Veriah	4-4-09
7.	45	1202	KAKANI MALESHWARAO	K. M. Malleshwarao	4-4-09
8.	45	1205	KAKANI ARJUN	K. Arjun	4-4-09
9.	45	1186	KUCHIPUDI LAKSHMI DEVI	L. Lakshmi Devi	4-4-09
10.	45	1210	BALAJIPALLI GAIDU	B. Gaidu	4-4-09

N.B.: There should be ten electors of constituency as proposers.

PART III

I, the candidate mentioned in Part I/Part II (Strike out which is not applicable) assent to this nomination and hereby declare—

(a) that I have completed 45 years of age:

[STRIKE OUT b(i) OR b(ii) BELOW WHICHEVER IS NOT APPLICABLE]

- (b) (i) that I am set up at this election by the INDEPENDENT party, which is recognized National Party/State Party in this State and that the symbol reserved for the above party be allotted to me.
- (ii) that I am set up at this election by the INDIAN NATIONAL CONGRESS party, which is a registered unrecognised political party/that I am contesting this election as an independent candidate (Strike out which is not applicable) and that the symbols I have chosen, in order of preference, are:-

(i) SCISSORS (ii) T.V. (Television) (iii) FAN


(c) that my name and my father's/mother's/husband's name have been correctly spelt out above in ENGLISH (name of the language)

(d) that to the best of my knowledge and belief, I am qualified and not also disqualified for being chosen to fill the seat in the Legislative Assembly of this State.

I further declare that I am a member of the CHRISTIAN Caste/Tribe which is a scheduled Caste/Tribe of the State of ANDHRA PRADESH in relation to GUNTUR DISTRICT (area) in that State.

I also declare that I have not been, and shall not be, nominated as a candidate at the present general election/the bye-elections being held simultaneously, to the Legislative Assembly of ANDHRA PRADESH (State) from more than two Assembly Constituencies.

Date 04-04-2009


Signature of the Candidate

*Score out this paragraph, if not applicable.

**Score out the Words not applicable.

N.B.: A "recognized political party" means a political party recognized by the Election Commission under the Election Symbols (Reservation and Allotment) Order, 1968 in the State concerned.

PART III A

(To be filled by the candidate)

Whether the Candidate -

- (i) has been convicted - NILL
(a) of any offence(s) under sub-section (1); or
(b) For contravention of any law specified in Sub-Section (2), of Section 8 of the Representation of the People Act, 1951 (43 of 1951); or
- (ii) has been convicted for any other offence(s) for which he has been sentenced to imprisonment for two years or more.

YES/No.

If the answer is "Yes", the candidate shall furnish the following information:

- (i) Case/First information report No./Nos
(ii) Police station (s)
District(s)
State(s)
Section(s) of the concerned Act(s) and brief description of the offence(s) for which he has been convicted
Date(s) of conviction(s)
Court(s) which convicted the candidate
Punishment(s) imposed [indicate period of imprisonment(s) and/or quantum of fine(s)]
Date(s) of release from prison
Was/were any appeal(s)/revision(s) filed against above conviction(s) :
Date and particulars of appeal(s)/application(s) for revision filed
Name of the court(s) before which the appeal(s) /application (s) for revision filed

NILL

NILL

NILL

NILL

NILL

NILL

NILL

Yes/No

NILL

NILL

NILL

NILL

NILL

Whether the said appeal(s) / application (s) for revision has/have been disposed of or is/are pending
If the said appeal(s)/application(s) for revision has/have been disposed of
a Date(s) of disposal
b Nature of order(s) passed

NILL
NILL
NILL
NILL
NILL

Place PONNUR
Date 04-04-2009

NILL
Signature of Candidate

PART IV

(To be filled by the Returning Officer)

Serial No. of nomination paper..... This nomination was delivered to me at my office at.....(hour) on.....(date) by the candidate/proposer.....
Date Returning Officer

*Score out the word not applicable.

PART V

Decision of Returning Officer Accepting or Rejecting the Nomination Paper

I have examined this nomination paper in accordance with section 36 of the Representation of the People Act, 1951 and decide as follows:

.....
.....
.....
.....

Date Returning Officer
Perforation)

.....
.....
.....