

Affidavits of 214_12. Shaik_Karimulla - IND



2009 Date 2/3-2009

234A 099884

M. VENKATESWARA RAO
S.V. PITNAM BAZAR, GUNTUR
L NO: 2/36, R.L. No: 6/2008

FORM 26 (SEE RULE 4A)

Affidavit furnished by the candidate before the returning Officer for election to **ASSEMBLY** (name of the House) from **GUNTUR EAST 214** Constituency (Name of the constituency)

I, **SHAIK KARIMULLA** S/o. Mastan, aged : 40 years, Door No.17-7-1, Anandpet, 4th Lane, Guntur City, A.P. candidate at the above election, do hereby solemnly affirm / state on oath as under:-

1. I am not accused of any offence(s) punishable with imprisonment two years or more in a pending case(s) in which as charge(s) has/ have been framed by the court(s) of competent jurisdiction.

If the deponent is accused of any such offence(s) he shall furnish the following information.

- (i) Case / First information reports No. / Nos. **N/D**
- (ii) Police Station (s) **N/D** District (s) **N/D** States (s)



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- (iii) Section(s) of the concerned Act (s) and short description of the offence (s) for which the candidate has been charged N.P.
- (iv) Which framed the charges(s) N.P.
- (v) Date(s) on which the charge (s) N.P.
- (vi) Whether all or any of the proceeding (s) have been stayed by any court (s) of competent jurisdiction. N.P.

2. I have been not been convicted of an offence(s) (other than any offences) referred to in Sub-section (1) or sub-section (2) or covered in sub-section (3), of section-8 of the Representation of the People Act, 1951 (43 of 1951 and sentenced to imprisonment for one year or more.

If the deponent is accused of any such offence(s) he shall furnish the following information.

- (i) Case / First information reports No. / Nos. N.P.
- (ii) Court(s) which punished N.P.
- (iii) Police Station (s) N.P. District (s) N.P. States (s)
- (iv) Section(s) of the concerned Act (s) and short description of the offence (s) for which the candidate has been charged N.P.
- (v) Date(s) on which the charge (s) N.P.
- (vi) Whether all or any of the proceeding (s) have been stayed by any court (s) of competent jurisdiction. N.P.

Place date *X B. Sainy*
Signature of Deponent

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 at *Guntur* this the *2nd* day of *April* 200*9*.

X B. Sainy
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

My Commission
Expires on 31-5-2013 as per
G.O. Pt. No. 1285 Dt. 16-5-08



23AA 099885
 M. VENKATESWARA RAO
 S.V. PATNAM BAZAR, GUNTUR
 L. NO. 2/96, R.L. No. 6/2008
 362-3/3-2009
 23/3/2009

ANNEXURE - I
AFFIDAVIT TO BE FURNISHED BY CANDIDATE ALONG WITH NOMINATION PAPER
BEFORE THE RETURNING OFFICER

for election to ASSEMBLY (name of the House)
 From GUNTUR EAST (214) constituency
 Name of the constituency

I, **SHAIK KARIMULLA** S/o. Mastan, aged : 40 years, Door No.17-7-1, Anandpet, 4th Lane, Guntur City, A.P. candiate 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 : **No**
- (ii) The Court which has cognizance : **No**
- (iii) Case No : **No**

Date of order of the Court taking cognizance : **No**

Wills of appeal (s) / application(s) for revision, etc., if any, against above order taking cognizance: **No**



(Handwritten signature)

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	50,000/-	NIL			
(ii)	Deposits in Banks Financial Institutions and Non-Banking Financial Companies	NIL	NIL	NIL	NIL	
(iii)	Bonds, Debentures and Shares in Companies	NIL	NIL		NIL	
(iv)	Other Financial instruments NSS, Postal Savings, LIC Policies, etc.	NIL	NIL		NIL	
(v)	Motor Vehicles (details of make, etc.)	NIL	NIL		NIL	
(vi)	Jewellery (give details of weight and value)		100 Rs		NIL	
(vii)	Other assets, such as values of claims/ interest	20,000/-	NIL		NIL	

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 depends on the income of the candidate.



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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	nil	nil	nil	nil	nil
(ii)	Non-Agricultural Land - Location(s) - Survey Number(s) - Extent (Total Measurement) - Current market value	nil	nil	nil	nil	nil
(iii)	Buildings (Commercial and residential) - Location(s) - Survey Number(s) - Extent (Total Measurement) - Current market value	nil	nil	nil	nil	nil
(iv)	House / Apartments etc., - Location(s) - Survey Number(s) - Extent (Total Measurement) - Current market value	nil	nil	nil	nil	nil
(v)	Others (such as interest in Property)	nil	nil	nil	nil	nil



T. G. Goudy

(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	nil	nil
	(ii) Loans from Financial Institutions	nil	nil
	(iii) Government dues :-	nil	nil
	a) Dues to departments dealing with Government accommodation	nil	nil
	b) Dues to departments dealing with supply of water	nil	nil
	c) Dues to departments dealing with supply of electricity	nil	nil
	d) Dues to department dealing with telephones	nil	nil
	e) Dues to departments dealing with government transport (including aircrafts and helicopters)	nil	nil
	f) Other dues if any	nil	nil
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))	nil	nil
	(ii) Wealth Tax (Also indicate the assessment year upto which Wealth Tax return filed.	nil	nil
	(iii) Sales Tax (Only in case of proprietary Business)	nil	nil
	(iv) Property Tax	nil	nil



[Handwritten Signature]

