

Declaration of Assets and Liabilities

I, **BALVANT RAM**, Year.....
 aged **38** years, belonging to **LT. SHIVSHANKAR RAM**
 service and presently working as **MUKHIYA**
 give herein below the details of the assets (immovable, movable, bank balance, etc.) of myself, my spouse and dependants*:

A. Details of movable assets
 (Assets in joint name indicating the extent of joint ownership will also have to be given)

| Sr. No. | Description | Self | Spouse Name(S) | Dependant t-1 Name | Dependant-2 Name | Dependant t-3 Etc. Name |
|---------|---|----------------------|----------------|--------------------|------------------|-------------------------|
| (i) | Cash | 50000/- | | | | |
| (ii) | Deposits in Banks, Financial Institutions And Non-Banking Financial Companies | MBWB- | MINA PASWAN | | | |
| (iii) | Bonds, Debentures and Shares in companies | | | | | |
| (iv) | Other financial institutions, NSS, Postal Savings, LIC Policies, etc | LIC 100000/- | | | | |
| (v) | Motor Vehicles (details of make, etc.) | 4 Weedar 2 Weedar | | | | |
| (vi) | Jewellery (give details of weight and value) | | | | | 20000/- |
| (vii) | Other assets, such as values of claims / interests | | | | | |

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.
 * Dependant here means a person substantially dependent on the income of the employee.

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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]

| Sr. No. | Description | Self | Spouse Name(S) | Dependant t-1 Name | Dependant t-2 Name | Dependant-3 Etc. Name |
|---------|---|----------|----------------|--------------------|--------------------|-----------------------|
| (i) | Agricultural Land - Location(s) - Survey number(s) - Extent (Total measurement) - Current market value | 3 Acre | MINA PASWAN | | | |
| (ii) | Non-Agricultural Land - Location(s) - Survey number(s) - Extent (Total measurement) - Current market value | | | | | |
| (iii) | Buildings (Commercial and residential) Location(s) - Survey /door number(s) - Extent (Total measurement) - Current market value | One Home | | | | |
| (iv) | Houses / Apartments, etc. - Location(s) - Survey /door number(s) - Extent (Total measurement) - Current market value | | | | | |
| (v) | Others (such as interest in property) | | | | | |

(2) I give herein below the details of my liabilities / over dues to public financial institutions and government dues:-

[Note : Please give separate details for each item]

| Sr. No. | Description | Name & address of Bank / Financial Institutions(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 | | |

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| | | | |
|-----|---|--|--|
| | (d) dues to departments dealing with telephones | | |
| | (e) dues to departments dealing with government transport (including aircraft and helicopters) | | |
| | (f) Other dues, if any | | |
| (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 | | |

C. Personal Detail

GPF/CPF/PRAN No. :-

Gender :-

M (M/F)

Date of Birth :-

0 8 1 2 1 9 8 2 (DD/MM/YYYY)

Class/Group :-

 (A/B/C)

Cadre :-

(Full Name e.g. B.A.S.-Bihar Administrative Service,
B.S.S.- Bihar Secretariat Service etc.)

Home District :-

AURANGABAD

I hereby declare that the above details are true to the best of my knowledge and belief.

Signature बलवन्त राम

Name of Employee: **मुखिया**

Designation: **ग्राम पंचायत काजीचक**

Department: **पखण्ड-बारुण (औरंगाबाद)**

Place:

Date: