

Certificate

Certified that I have Personally counted the pages of
election expenditure register part A/B/C Counted Pages 1 to 52
found correct.


(Jeelani H. Mokashi)
Returning Officer
03-Athani Assembly Constituency
and Joint Director of Agriculture
Belagavi.

(Part - A)

Register for Maintenance of Day to Day Accounts of Election Expenditure by Contesting Candidates

Name of the Candidate : Shrishail Tukappa HavalakondaName of Political Party, if any : IndependentConstituency form which contested : 03 AthaniDate of Declaration of Result : 9/12/2019Name and address of Election Agent : Postant Suresh BakariTotal Expenditure incurred / authorized : 1500

(From the date of nomination to the date of declaration of result of election, both dates inclusive)

1.	2.			3.	4.	5.	6.	7.	8.	9.
Date of Expenditure / Event	Nature of Expenditure			Total Amount in rupees (paid+ outstanding)	Name and address of payee	Bill.No / Voucher No. and date	Amount incurred/authorized by candidate or his election agent	Amount incurred/ authorized by political party and name of political party	Amount incurred/authorized by order by individual/association/body/any other (Mention full name and Address)	Remarks if any
	5x	300	rs	1500						
	3x	1500	rs	4500						
	Description	Qty.	Rate per unit							
				9300						

Certified that this is a true account kept by me/my election agent under section 77 of the Representation of the People Act, 1951 (Certificate to be furnished after the date of declaration of result).

Suresh
Signature of the Candidate

	1.	2.	3.	4.	5.	6.	7.	8.	9.
1	18/11/19	nomination fee	10,000	Ro Athamip	Conduct	—	—	—	
3	24/11/19	KA49N 8888							
		2x 3150	6300						
		2x 1200 ts	2400						
		2x 260 dr	520						
		KA 48 m3218	3675						
		lowd speaker	1200						
		Driver Salary	260						
			<u>24355</u>						

Sheet

*Failed upto 24/11/19
 (Name) 25/11/19
 E-o (02-Atham)*

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(Part - B)
Cash Register for Maintenance of Day to Day Accounts by Contesting Candidates

Name of the Candidate : Shrishail Tukappa Haladornal Name of Political Party, if any :

Constituency from which contested : 03 Athani

Date of Declaration of Result : 9/12/2019

Name and address of Election Agent : Prashant Suruh Bakari

(From the date of nomination to the date of declaration of result of election, both dates inclusive)

Receipt				Payment				Balance Amount	Remarks, if any
Date	Name and address of person/party/association/body/any other from whom the amount received	Receipt No.	Amount	Bill No./ voucher No. and date	Name of payee and Address	Nature of expenditure	Amount	Places at which or person with whom the balance is kept (if cash is kept at more than one place/persons, mention name and balance available)	Any expense mentioned in column 7 of this table and not mentioned in column 2 of table of Part-A should be clarified here.
1.	2.	3.	4.	5.	6.	7.	8.	9.	10.

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1.	2.	3.	4.	5.	6.	7.	8.	9.	10.
18/1/19	Self	-	10000						
18/1/19	S. -	-	-						
				18/1/19	Ro Athar monthly fee	10000		-	-
					fee			-	
					18/1/19				
					checked upto 24/1/19.				
					Ro utility				
					(E.O 03-Athar)				

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Belagavi.

(Part - C)

Bank Register for Maintenance of Day to Day Accounts by Contesting Candidates

Name of the Candidate : Shrishail Tukappa Halladmal Name of Political Party, if any :Constituency form which contested : 03 AthaniDate of Declaration of Result : 9/12/2019Name and address of Election Agent : Prashant Suresh BakkarName of the Bank : Canara BankBranch Address : AthaniAccount No. : 1069101028052

(From the date of nomination to the date of declaration of result of election, both dates inclusive)

Date	Deposit			Payment			Balance Amount	Remarks, If any	
	Name and address of person/party/association/body/any other from whom the amount received / deposited in Bank	Cash/ Cheque No., Bank name and Branch	Amount	Cheque no.	Name of payee	Nature of Expenditure			Amount
1.	2.	3.	4.	5.	6.	7.	8.	9.	10.
									Any expense mentioned in column 7 of this table and not mentioned in Column 2 of Table of Part-A should be clarified here.

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Signature of the Candidate

Deposit			Payment				Balance	
Date	Name, address	2. Cash/ check	3. Amount	4. check no (date)	5. name of payee	6. amount	7. Balance amt.	8. Remark
10/20/19	Self	By Cash	1003	-	expense	-	1003	
18/11/2019	Self	By Cash	10,000					
18/11/2019	-	-	-	11515920	Self	10000	1003	transmission fee

to deposit

checked upto 24/11/19.
 (E.O. OBAHANI)