

Certificate

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

Advokate

(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 : *Nagamathi V. Yadgir*
 Name of Political Party, if any : *Uttama Prajalaya*
 Constituency form which contested : *03*
 Date of Declaration of Result : *09/12*
 Name and address of Election Agent : *Alashay*
 Total Expenditure incurred / authorized :

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

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

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).


 Signature of the Candidate

1. 2. 3. 4. 5. 6. 7. 8. 9.

18-11-19 Norm's dia
free paid

18-11-19
10000/-
10000/-

RO
Athan
18-11-19

477625
18-11-19

Capital

11,00,000/-

11,00,000/-

11,00,000/-

11,00,000/-

Checked RO details.
Date: 25/11/19
(E.O. 03-ARNAV)

NO TRANSACTIONS

Checked for period upto 25/11/19

Signature
(E.O. 03-ARNAV)

Signature

1. 2. 3. 4. 5. 6. 7. 8. 9.

28-11-2019

to

3-12-2019

NIL

₹ Tenk

10,000/-

checked for period upto 31st 12/19.

~~Prakash~~
Srikanth

Prakash
31/12/19 16:40:43

(K. O. S. Arani)

Prakash

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(Part - B)

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

Name of the Candidate : *Nagenath. W. Yadav* Name of Political Party, if any :
Constituency form which contested : *03*
Date of Declaration of Result : *09/1/12*
Name and address of Election Agent : *AKSLEY*

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

Date	Receipt		Payment			Balance Amount Places ar which or person which whom the balance is kept (if cash id kept at more than one Place/Persons. Mention name and available balance	Remarks, If any		
	Name and address of person/party/associati on/body/any other from whom amount received	Receipt No.	Amount	Bill.No. / Voucher No. and date	Name of payee and Address			Nature of Expenditure	Amount
1.	2.	3.	4.	5.	6.	7.	8.	9.	10.

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).


Signature of the Candidate

1. 2. 3. 4. 5. 6. 7. 8. 9.

16/11/19

16/11/19

17.11.19
to
24.11.19

24.11.19
to

27.11.19

~~NIL~~

Self

477629
18-11-2019

Bo

Nomination
Nominata 1000
Nominata Fee

2000/- Paid

Checked nil surplus. — NIL —

Over

(E-O, 01 - Arhan)

Uncredited

18000/-

NIL
3000/-

— NIL —

Checked for period upto surplus

Over

(E-O, 03 - Arhan) 2

Arhan

1. 2. 3. 4. 5. 6. 7. 8. 9.

28-11-19

to _____ NRZ _____ NRZ

3-12-2019

10,000

10,000

~~10000~~
10000

10000
slips (1400)
(E.O. 03-PR-014)

P. U. Rendhiwal

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Belagavi.

(Part - C)

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

Name of the Candidate : *Akshay Naganath. V. Yadagir*
Constituency form which contested : *0.3*
Date of Declaration of Result : *09/12*
Name and address of Election Agent : *Akshay*
Name of the Bank : *S.B.I*
Branch Address : *OLD HOSPITAL Quarters*
Account No. : *38 797536463*

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

Date	Name and address of person/party/association/body/any other from whom the amount received / deposited in Bank	Deposit			Payment			Balance Amount	Remarks, If any
		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.

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).

Akshay
Signature of the Candidate

1. 2. 3. 4. 5. 6. 7. 8. 9.

3000/-
18000/-
3000/-
3000/-

4-11-19

Sy by cur 1000

16-11-19

4 1000

16/11/19 Self

Cash 1000/-
Self 500/-
withdrew 500/-

16-11-19

10000

17-11-19

checked for period till 21/11/19

to

24.11.19

NIL — 25/11/19

A.U. medical

3000/-

25.11.19

to

27.11.19

— NIL —

3000/-

checked for period upto 27/11/19

28/11/19

(E.O. 02-Advani)

Atgod 2002

1. 2. 3. 4. 5. 6. 7. 8. 9.

28-11-2019

to

3-12-2019

NIL

_____ 43000/-

10,000

10,000

43000/-

checked for period

~~Signature~~

upto 21/12/19
21/12/19
16.12/19
(E.O, os. Aham)

A. U. Graduate

Generally used abbreviations

a/c = Account	dep = Deposit	Pf = Principal
adj = Adjustment	Dft = Draft	Proc = Processing Charge
Amt = Amount	dish/dsh = Dishonour	rd = Recurring Deposit
Ar = Arrear	DR = Debit	rlrn = Return
bal = Balance	DoB = Date of	rd = Round of
Capn = Capitalization	eft = Electroni	Saving Bank
chg/ch = Charge	lnop = Inoper.	C = Short Credit
chq = Cheque	ins = Insuran	/So/SORD = Standing Instruction
Clos = Closure	int/in = Int	/D/W/H/o = Son/Daughter/Wife/Husband of
coll = Collection	lon/in = Loc...	trf/xfer = Transfer
comm = Commission	min = Minimi	T = Telegraphic Transfer
COR/CORR = Correction	os = Outstand	tn = Transaction
CR = Credit	P & T = Post	/di = Withdrawal
csh = Cash	Pos = Print of sale	+ MOD bal = total balance (SB+linked MOD a/c)



REGULAR SB CHO-INDIVIDUALS

CIF No : 7248461793
Account No : 38797536463

Customer Name: Mr. NAGANATH V YADGIR

S/D/W/H/O: VENKAT RAO
Address: H.NO 10-816

UPPER LANE BRAHMPUR
GULBARGA

Phone:

Email:

D.O.B. (If Minor):

MOP.: SINGLE

Nom. Reg. No.:

OLD HOSPITAL, GULBARGA
5 & 6, KHAJA NAGRI COMPLEX

Phone: 221959

Email: SBI.20717@SBI.CO.IN

Branch Code: 20717

Date of Issue: 25/09/2019

25/09/2019 3120481 20717

IFSC: SBIN0020717

MICR: 585002052

FIRST



DATE	PARTICULARS	CHEQUE NO.	DEBIT	CREDIT	BALANCE
	UPI/CR/930815866904/DR. HASAN/HDFC/***** 998800162092			3000.00	3000.00Cr
15.11.19	CASH DEPOSIT SELF AT 20717 OLD HOSPITAL, GULBARGA			10000.00	13000.00Cr
15.11.19	CASH WITHDRAWAL SELF AT 20717 OLD HOSPITAL, GULBARGA		10000.00		3000.00Cr
	Uncld Bal: 0.00 Clr Bal: 3000.00 Cr: +600 Bal: 0.00				