

ଫାରମ ସଂଖ୍ୟା—3
[ନିୟମ 12(3) ଦ୍ରଷ୍ଟବ୍ୟ]
ଜମା ପରିମାଣର ରସିଦ

28379

(କାର୍ଯ୍ୟାଳୟ ନକଲ)

ସଂଖ୍ୟା..... PW ତାରିଖ..... PW/ ୦୧/୨୦୨୨

ଶ୍ରୀ/ଶ୍ରୀମତୀ..... ସୁକୁମାର ଦାସ..... ଠାକୁ

ପରିଷଦର ସଭ୍ୟ ପଦର ପ୍ରାର୍ଥନା ନିମନ୍ତେ ଜମା ଦିଆଯାଇଥିବା
ଅମାନତ ଟ..... ୧୦୦/..... (ଅକ୍ଷରରେ)

ଟଙ୍କା..... ଟଙ୍କା/.....) ମାତ୍ର

..... ଟଙ୍କା ପରିଷଦ

ପାଇଁ ଗ୍ରହଣ କଲୁ ।

ସୁକୁମାର ଦାସ

ନିର୍ବାଚନ ଅଧିକାରୀ
ନିର୍ବାଚନ ଅଧିକାରୀ

ଉପ.ଜିଲ୍ଲାପାଳ, ପାଞ୍ଚପିଟ

କଟକ

1
2:40PM

ପାରମ ସଂଖ୍ୟା—4
[ନିୟମ 12 (10) ଦ୍ରଷ୍ଟବ୍ୟ]
ମନୋନୟନ ପତ୍ର

..... ମୁକ୍ତମୂଳକ ଜିଲ୍ଲାର ଜିଲ୍ଲା ପରିଷଦ ନିମନ୍ତେ ନିର୍ବାଚନ ।

ମୁଁ ଜିଲ୍ଲା ପରିଷଦ ନିର୍ବାଚନ ନିମନ୍ତେ ଭାଗ୍ୟବେଦୀ ଭୋଟ ନଂ-୪୩ ପରିଷଦ ନିର୍ବାଚନ ମଣ୍ଡଳୀରୁ ନିମ୍ନଲିଖିତ ବ୍ୟକ୍ତିଙ୍କୁ ପ୍ରାର୍ଥୀ ଭାବରେ ମନୋନୀତ କରୁଅଛି ।

ପ୍ରାର୍ଥୀଙ୍କ ନାମ ସୁକୁମ୍ଭ ଦସ୍ତ

ସିଦ୍ଧା/ପତିଙ୍କ ନାମ ରମେଶ ଚନ୍ଦ୍ର ଦସ୍ତ

ତାଙ୍କର ଡାକ ଠିକଣା ଶାନ୍ତି-ପାଠ, ପୋ.ପା-ସାହୁବାଳା, ଥାନା-ଭାଗ୍ୟବେଦୀ,
..... ଭାଗ୍ୟବେଦୀ ଭୋଟ ନଂ ୪୩ ଡାକ୍ତରୀ ପରିଷଦ ନିର୍ବାଚନ ମଣ୍ଡଳୀର ଭୋଟର ତାଲିକାରେ ତାଙ୍କ ନାମ ଦରଜ ହୋଇଥିବା

କ୍ରମିକ ସଂଖ୍ୟା ୧୫୫ ପାନପତ୍ରିଆ ଗା.ପା. ବ୍ଲକ୍ ନଂ-୦୮

ମୋର ନାମ ସୁକୁମ୍ଭ ଦସ୍ତ ଅଟେ ଏବଂ ଭାଗ୍ୟବେଦୀ ଭୋଟ ନଂ-୪୩ ଡାକ୍ତରୀ

ପରିଷଦ ନିର୍ବାଚନ ମଣ୍ଡଳୀର ଭୋଟର ତାଲିକାର କ୍ରମିକ ସଂଖ୍ୟା ୧୮୮ ପାନପତ୍ରିଆ ଗା.ପା. ବ୍ଲକ୍ ନଂ-୦୪ ରେ ତାହା ଦରଜ କରାହୋଇଅଛି ।

ତାରିଖ ୨୦/୦୧/୨୦୨୨
.....
ପ୍ରଶାସକ ସ୍ଵାକ୍ଷର

ମୋର ନାମ ସୁକୁମ୍ଭ ଦସ୍ତ ଅଟେ ଏବଂ ଭାଗ୍ୟବେଦୀ ଭୋଟ ନଂ-୪୩

ପରିଷଦ ନିର୍ବାଚନ ମଣ୍ଡଳୀର ଭୋଟର ତାଲିକାର କ୍ରମିକ ସଂଖ୍ୟା ୧୦୭ ପାନପତ୍ରିଆ ଗା.ପା. ବ୍ଲକ୍ ନଂ-୦୮ ରେ ତାହା ଦରଜ ହୋଇଅଛି ।

ତାରିଖ ୨୦/୦୧/୨୦୨୨
.....
ସମର୍ଥକଙ୍କ ସ୍ଵାକ୍ଷର

ମୁଁ ଉପର ମନୋନୀତ ପ୍ରାର୍ଥୀ ମନୋନୟନ ପ୍ରତି ସମ୍ମତ କରାଉଛି ଏବଂ ଏତଦ୍ଵାରା ଘୋଷଣା କରୁଅଛି ଯେ-

- (କ) ମୋର ବୟସ ୪୦ ବର୍ଷ ସଂପୂର୍ଣ୍ଣ ହୋଇଅଛି ।
- * (ଖ) ମୁଁ ଭାଗ୍ୟବେଦୀ ଭୋଟ ନଂ-୪୩ ଦଳଦ୍ଵାରା ଏହି ନିର୍ବାଚନରେ ଛିଡା ହୋଇଛି ।
- (ଗ) ପସନ୍ଦ ହେଉଥିବା ସଂକେତ, ପସନ୍ଦ କ୍ରମରେ (i) ସୁକୁମ୍ଭ
(ii) ଏବଂ (iii)

(ଘ) ମୋର ଏବଂ ମୋର ପିତା/ପତିଙ୍କର ନାମ ଉପରେ ବୁଦିଆ

..... (ଭାଷାର ନାମ) ଠିକ୍ ଭାବରେ ବନାନ କରାଯାଇଛି ।

(ଙ) ମୋର ଜ୍ଞାନ ଓ ବିଶ୍ୱାସ ଅନୁଯାୟୀ ମୁଁ ପ୍ରାର୍ଥୀ ହେବା ପାଇଁ ଯୋଗ୍ୟ ଏବଂ ଯଦି ମୋତେ ମାଗଣା ଦେବା ଭୋଗ

ମନୁଷ୍ୟ..... ଜିଲ୍ଲାର ଜିଲ୍ଲା ପରିଷଦର ଆସନ ପୂରଣ ନିମନ୍ତେ ପସନ୍ଦ କରାଯାଏ ତେବେ ମୁଁ ଅଯୋଗ୍ୟ ନୁହେଁ ।

ପୁନଶ୍ଚ ମୁଁ ଘୋଷଣା କରୁଅଛି ଯେ ମୁଁ କୃଷ୍ଣ ଘୋଷ

** କାଟି/ଜନକାଟିର ସଦସ୍ୟ ଯାହାକି ଓଡ଼ିଶା ରାଜ୍ୟର ଅନୁସୂଚିତ କାଟି/ଅନୁସୂଚିତ ଜନକାଟି/ପଲ୍ଲୀଆକର୍ଷ ନାଗରିକ ଅଟେ ।

ବୁଦିଆ ଦାସୀ
Budiani Dasai

ପ୍ରାର୍ଥୀଙ୍କ ସ୍ୱାକ୍ଷର

ତାରିଖ ୨୦/୦୧/୨୦୨୨

- * ପ୍ରଯୋଜ୍ୟ ହେଉନଥିବା ପାରାକୁ କାଟି ଦିଅନ୍ତୁ ।
- ** ପ୍ରଯୋଜ୍ୟ ହେଉନଥିବା ଶବ୍ଦକୁ କାଟି ଦିଅନ୍ତୁ ।

(ନିର୍ବାଚନ ଅଧିକାରୀଙ୍କଦ୍ୱାରା ପୂରଣ କରି)

ମନୋନୟନ ପତ୍ର କ୍ରମିକ ସଂଖ୍ୟା ୦୧

ଏହି ମନୋନୟନ ପତ୍ର ମୋତେ ମୋର କାର୍ଯ୍ୟାଳୟରେ ୨୦.୧.୨୦୨୨

ତାରିଖରେ ୨:୦୦ pm..... ସମୟରେ ପ୍ରାର୍ଥୀ/ପ୍ରସ୍ତାବକଙ୍କ ଦ୍ୱାରା ଦିଆଗଲା ।

[Signature]
୨୦/୦୧/୨୦୨୨
ନିର୍ବାଚନ ଅଧିକାରୀ

ତାରିଖ ୨୦.୧.୨୦୨୨

ନିର୍ବାଚନ ଅଧିକାରୀଙ୍କର ମନୋନୟନ ପତ୍ର ମଞ୍ଜୁର କରିବା ବା ନାମଞ୍ଜୁର କରିବା ନିଷ୍ପତ୍ତି

ମୁଁ ଓଡ଼ିଶା ଜିଲ୍ଲା ପରିଷଦ ଅଧିନିୟମ, 1991ର ବ୍ୟବସ୍ଥା ଅନୁସାରେ ଏବଂ ତଦଧୀନ ପ୍ରଣୀତ ନିୟମାବଳୀ ଅନୁଯାୟୀ ଏହି ମନୋନୟନ ପତ୍ରଟିକୁ ପରୀକ୍ଷା କରି ଦେଖୁଅଛି ଏବଂ ନିମ୍ନମତେ ନିଷ୍ପତ୍ତି କରୁଅଛି :—

* ମନୋନୟନ ପତ୍ର ଗ୍ରାହ୍ୟ/ଅଗ୍ରାହ୍ୟ

ତାରିଖ

ନିର୍ବାଚନ ଅଧିକାରୀ

357. .ADL .1.9.1.12

Budhani Daral (S.K. Choudhury) 1.9.1.12



ଓଡ଼ିଶା ओडिशा ODISHA

S.K. Choudhury
Notary
Karanjia

53AA 176578

FORMAT OF AFFIDAVIT

(To be submitted by candidate to the Election Officer/Returning Officer as an accompaniment to the Nomination Paper)

*For the election to the office of of in
of District/Member of P.S. of
District/Member of **Zone No.43 (Raruan Block) Zilla Parishad** of **Mayurbhanj**
District/Corporator of Municipal Corporation of
..... District/Councilor of Municipality/NAC of
..... District.

*(Please strike off the ones not applicable to you)

କାର୍ଯ୍ୟକାରୀ ନାହିଁ ୨୦୨୨ ମସିହା ୧୨/୦୭/୨୨
କାର୍ଯ୍ୟକାରୀ ନାହିଁ ୧୨

*Baduni Darai

Rayan Kishor Mohapatra
19/11/2022

I, Budun
u, P.O.- Raikala, P.S.
solemnly affirm and state
**1. (A)

AFFIDAVIT
Karanija Bar Association
Sl.No. 3286 Date 19/01/22
Signature of ...



SUB-TREASURY OFFICER
KARANJIA MAYURBHANJ
JUL 2021
RECEIVE

I, **Buduni Darai**, aged about 38 years, Wife of **Kshetra Mohan Darai of Village-
Ju, P.O.- Raikala, P.S- Ghagarbeda, Dist- Mayurbhanj** Candidate at the above election, do here
solemnly affirm and state on oath as under:-

**1. (A) I have in the past been convicted of criminal offence in the following case(s) and the details
are as under:-

- (i) Case No: NIL
- (ii) Section of the Act and description of the offence for which convicted: NIL
- (iii) Date of Conviction: NIL
- (iv) Court by which convicted: NIL
- (v) Punishment imposed (indicate period of imprisonment awarded and/or quantum of the fine
imposed): NIL
- (vi) Details of appeal/revision etc. against conviction: NIL

(Repeat the above sequence in respect of each separate case of conviction)

(B) That I have in the past been discharged/acquitted in the following case(s): NIL

- (i) Section of the Act and description of the offence with which charged: NIL
- (ii) The Court which had taken cognizance: NIL
- (iii) Case No: NIL
- (iv) Details of appeal/application for revision etc. if any, filed against above order taking
cognizance: NIL

(Repeat the above sequence in respect of each separate case of discharge/acquittal)

(C) The following case (s) is/are pending against me in which cognizance has been taken by the

- (i) Court: Section of the Act and description of the offence for which cognizance taken:
- (ii) The Court which has taken cognizance:
- (iii) Case No:
- (iv) Details of appeal/application for revision etc., if any, filed against above order taking
cognizance:

(Repeat the above sequence in respect of each separate case of cognizance by Court)

** If information against any of the columns at (A)/(B)/(C) is NIL, state 'NIL' against the corresponding
column and strike of the sub-columns below.

Handwritten notes:
19-1-2022
Buduni Darai



That, I/my spouse/my dependants*** own the following movable property:

	Motor vehicle with description such as Car, Jeep, Truck, Bus	Approx. present market value according to you	Gold & gold ornaments; other precious stone(s) (in tolas/gram/carat)	Approx. present market value according to you	Silver & silver ornaments (in tolas/gram)	Approx. present market value according to you
Self name	NIL	NIL	5 gram	Rs.20,000/-	50 gram	Rs.3,000/-
Spouse (Give name)	NIL	NIL	NIL	NIL	NIL	NIL
Dependant son(s) (Give name(s))	NIL	NIL	NIL	NIL	NIL	NIL
Dependant daughter(s) (Give name(s))	NIL	NIL	NIL	NIL	NIL	NIL
Dependant (others) (Give name(s))	NIL	NIL	NIL	NIL	NIL	NIL
In Joint name(s) (Give names)	NIL	NIL	NIL	NIL	NIL	NIL

3.(B) That, I/my spouse/my dependants*** have the following Bank balance/deposits:

	Name of the Bank	Amount in Fixed deposit	Name of the Bank/Post Office	Amount in Current/Savings Account	Name of the Company & No. of shares held	Face value of shares
Self name	NIL	NIL	S.B.I. Chimila Branch A/c No.3264184918 B.O.I., Raruan Branch A/c No.545518210002654	Saving Accounts Rs.30,500/- Savings Account Rs.1,000/-	NIL	NIL
Spouse (Give name) Kshetra Mohan Darai	NIL	NIL	U.B.I. Budamora Branch A/c No.1315010153973	Savings Account Rs.1,50,000/-	NIL	NIL
Dependant son(s) (Give name(s)) Dharmadatta Barai	NIL	NIL	S.B.I., Chimila Branch A/c No.35359480681	Savings Account Rs.15,000/-	NIL	NIL
Dependant daughter(s) (Give name(s)) Chitranjali Darai	NIL	NIL	S.B.I., Chimila Branch A/c No.35359480705	Savings Account Rs.25,000/-	NIL	NIL



Budani Darai gda 14.1.2022

3.(A) That, I/my spouse/my dependants*** own the following movable property:

	Motor vehicle with description such as Car, Jeep, Truck, Bus	Approx. present market value according to you	Gold & gold ornaments; other precious stone(s) (in tolas/gram/carat)	Approx. present market value according to you	Silver & silver ornaments (in tolas/gram)	Approx. present market value according to you
Self name	NIL	NIL	5 gram	Rs.20,000/-	50 gram	Rs.3,000/-
Spouse (Give name)	NIL	NIL	NIL	NIL	NIL	NIL
Dependant son(s) (Give name(s))	NIL	NIL	NIL	NIL	NIL	NIL
Dependant daughter(s) (Give name(s))	NIL	NIL	NIL	NIL	NIL	NIL
Dependant (others) (Give name(s))	NIL	NIL	NIL	NIL	NIL	NIL
In Joint name(s) (Give names)	NIL	NIL	NIL	NIL	NIL	NIL

3.(B) That, I/my spouse/my dependants*** have the following Bank balance/deposits:

	Name of the Bank	Amount in Fixed deposit	Name of the Bank/Post Office	Amount in Current/Savings Account	Name of the Company & No. of shares held	Face value of shares
Self name	NIL	NIL	S.B.I. Chimila Branch A/c No.3264184918 B.O.I., Raruan Branch A/c No.545518210002654	Saving Accounts Rs.30,500/- Savings Account Rs.1,000/-	NIL	NIL
Spouse (Give name) Kshetra Mohan Darai	NIL	NIL	U.B.I. Budamora Branch A/c No.1315010153973	Savings Account Rs.1,50,000/-	NIL	NIL
Dependant son(s) (Give name(s)) Dharmadatta Barai	NIL	NIL	S.B.I., Chimila Branch A/c No.35359480681	Savings Account Rs.15,000/-	NIL	NIL
Dependant daughter(s) (Give name(s)) Chitranjali Darai	NIL	NIL	S.B.I., Chimila Branch A/c No.35359480705	Savings Account Rs.25,000/-	NIL	NIL



Buduni Darai 19.1.2022

Dependant (others) (Give name(s))	NIL	NIL			NIL	NIL
In Joint name(s) (Give names)	NIL	NIL	NIL	NIL	NIL	NIL

4. That, I/my spouse/my dependants*** are liable to pay the following dues to public, financial Institutions and Government dues (Give details).

	Government Dues		Income Tax Dues	Dues to Financial institutions	Any other Dues
	Details of the Nature of Demand/dues	Amount			
Self name	NIL		NIL	NIL	NIL
Spouse (Give name)	NIL		NIL	NIL	NIL
Dependant son(s) (Give name(s))	NIL		NIL	NIL	NIL
Dependant daughter(s) (Give name(s))	NIL		NIL	NIL	NIL
Dependant (others) (Give name(s))			NIL	NIL	NIL
In Joint name(s) (Give names)	NIL		NIL	NIL	NIL

*** Dependant means a person wholly dependent on the income of the candidate.



Buduni Daras Jais MM/2022 19.1.2022

5. My educational qualification are as under:

- 1. Class-VIII discontinued from Panchayat Girls High School, Chauthia, Dist- Keonjhar.

I, **Buduni Darai**, do hereby verify and declare that the contents of this affidavit are true and correct to the best of my knowledge and belief, that no part of it is false and that nothing materials has been concealed there from.

Verified at Karanjia this, the 19th day of January, 2022.

Witness:

Buduni Darai
Deponent

[Signature]
19.1.2022

1. Banamali Nayak
S/O - Abhimanyu Nayak Vill. Fage
P.O. - Raikata P.S. Ghatgopabes. ନିର୍ଦ୍ଦେଶକ

2. *[Signature]*
ଶ୍ରୀ. ଚନ୍ଦ୍ର. କୁମାର. ନାୟକ, ଧାର. କାନ୍ଥଗଡ଼ା
ଓ. ନାୟକ



Sworn on the 19th day of Jan 2022
by Name Buduni Darai
S/o, W/o, D/o Kshetra Mohan Darai
Vill. Kagu P.O. Raikata
P.S. Ghatgopabes DIST. Kharsiyana
Being Identified by M. Mohanta Adv.
the contents of the affidavit have been explained to which he/she appeared to understand as true & put his/her signature before me
S.K. Choudhury
Notary 19.1.22



FORM NO. I

(See Rule 3)

GOVERNMENT OF ODISHA

Office of the Tahasildar Roruan

Miscellaneous Certificate Case No E-STO/2022/03748

SCHEDULED TRIBE CERTIFICATE

This is to certify that Smt **BUDUNI DARAI** daughter of Smt **LEMBA MUNDA** and Shri **DAMADAR MUNDA** wife of Shri of village/town **Fagu P.S GHAGARBEDA** in the **MAYURBHANJ** district in the state of Odisha belongs to **Kolha** caste which is recognized as **Scheduled Tribe** under the constitution (scheduled Caste / Scheduled Tribe) order 1950 as amended by the scheduled Caste and Scheduled Tribe List (Modification) order 1956 and Scheduled Caste and Scheduled Tribe Order (Amendment) Act, 1976.

Smt **BUDUNI DARAI** and her family ordinarily reside(s) in village/town **Fagu P.S GHAGARBEDA** Tahasil **Roruan** in the district of **MAYURBHANJ** in the state of Odisha.



Digitally signed by SATYA SUNDAR ROUT
Date: 2022.01.17 07:40:04 +05:30

Signature of the Revenue Officer
17/01/2022

**** This is a Digitally Signed Document And Does Not Require Signature ****

NOTE

- (i) It is a digitally signed electronically generated certificate and therefore needs no ink-signed signature.
- (ii) This Certificate is issued as per section 4, 5, & 6 of Information Technology Act 2000 and its subsequent amendments in 2008 and as per Revenue & Disaster Management Department Notification number IMU-13/10-4251/R&DM.
- (iii) For any Query or Verification, Agency /Department / Office may visit <https://edistrict.odisha.gov.in>
- (iv) Tampering of this Certificate will attract penal action.

Buduni Darai

FORM NO.18

[See Rule 14 (4)]

To

The Election Officer

In respect of 43, Raruan
Zilla Parishad Constituency.

Sir,

Having been authorised by the President/General Secretary of the State Level/National Political Party, namely **BHARATIYA JANATA PARTY**, I hereby give notice that the following person(s) has/have been sponsored by **BHARATIYA JANATA PARTY** as its candidate(s) at the ensuing Zilla Parishad election and that **LOTUS** Symbol be allotted to him/her.

Sl. No	Name of the Zilla Parishad Constituency	Name of the Candidate Sponsored	Father's/Husband's name of the Candidate	Address of the Candidate
1	2	3	4	5
1.	43 Raruan	Budene Darcai	Khetsramohan Darcai	At - Phagu Po - Raikala Vca - Raruan PS - Ghagorba Dt - Mayurbhanj
2.				
3.				
4.				
5.				

Yours faithfully,

Manas K. Mohanty

(Manas Kumar Mohanty)

(Name and signature of the person who has been authorised by the State Level/National Political Parties to sponsor candidates)

Manas Kumar Mohanty
State General Secretary (Org.)
B.J.P., Odisha

Note: This must be delivered to the Election Officer on or before the date and time fixed for scrutiny of nomination papers.

FORM NO.17

(See Rule 7)

To

The Secretary to the State Election Commission, Orissa, Bhubaneswar-7.

Sub: - Zilla Parishad Election - Authorisation of persons to sponsor names of the Party's candidates for allotment of symbols etc.

Sir,

In pursuance of sub-rule (3) of Rule 7 of the Orissa Zilla Parishad Election Rules, 1994, I do hereby authorise the following persons to sponsor candidates for the ensuing Zilla Parishad Elections and endorse his/her/their specimen signatures duly attested by me against each.

Name of the person (s) authorised to sponsor candidates on behalf	Zilla Parishad in respect of which he has been authorised	Specimen signature of the person authorised	Attested of the signature by the President/General Secretary
1	2	3	4

1. Manoj Kumar Mohanty
State Gen. Secy., Org.
BJP, Odisha.

All Zilla Parishads
of Odisha.

Samir Mohanty

(Samir Mohanty)
PRESIDENT
BHARATIYA JANATA PARTY
ODISHA

2.

3.

4.

Yours faithfully,

Samir Mohanty

(Samir Mohanty)

President/General Secretary of the
State Level/National Political Party

Name of the Party-

BHARATIYA JANATA PARTY

(Seal of the Party)

PRESIDENT

BHARATIYA JANATA PARTY
ODISHA



Note: To be submitted in quadruplicate to the State Election Commission

[Handwritten signature]

1.2222
Receiving Officer
State Election Commission