

ANNEXURE-I

AFFIDAVIT TO BE FURNISHED BY CANDIDATE ALONG WITH NOMINATION PAPER

Before the Returning Officer
for By-Election to 07-Chakhei MDC Constituency within
MARA AUTONOMOUS DISTRICT COUNCIL, 2024

I _____ son / daughter of _____ aged _____ years, resident of _____, being candidate at the above election, do hereby solemnly affirm/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:-
- Section of the Act and description of the offence for which cognizance taken _____
 - The Court which has taken cognizance: _____
 - Case No. _____
 - Date of order of the Court taking cognizance _____
 - Details of appeal(s) / application(s) for revision, etc., if any, filed against above order taking cognizance. _____
- (2) That I give herein below the details of the assets (immovable, moveable, bank balance, etc.) of myself, my spouse and dependents. *

A: DETAILS OF MOVABLE ASSETS

(Assets in joint name indicating the extent of joint ownership will also have to be given)

Sl. No	Description	Self	Spouse(s) Name(s)	Dependent -1 Name:	Dependent -2 Name:	Dependent-3, etc Name:
(i)	Cash					
(ii)	Deposits in Bank, Financial Institutions and Non-Banking Companies					
(iii)	Bonds, Debentures and shares in companies					
(iv)	Other Financial instruments, NSS, Postal Savings, LIC Policies, etc.					
(v)	Motor vehicles (details of make, etc)					
(vi)	Jewellery (give details of weight and value)					
(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.

**Dependent here means a person is substantially dependent on the income of the candidate.*

B. DETAILS OF IMMOVABLE ASSETS

(Note: Properties in joint ownership indicating the extent of joint ownership will also have to be indicated)

Sl. 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					
(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					
(iv)	Houses/ Apartments, etc. - Location(s) Survey / Door Number(s) -Extent (Total measurement) - Current market value					
(v)	Others (such as interest in property)					

3. I give herein below the details of my liabilities / overdue to public, financial institutions and Government dues :-
 [Note : Please give separate details for each item.]

Sl. No.	Description	Name & Address of Bank/Financial Institution(s), Department(s)	Amount outstanding as on.....
(a)	(i) Loans from Bank		
	(ii) Loans from Financial Institutions		
	(iii) Government dues		
	(a) Dues to department dealing with Government accommodation		
	(b) Dues to departments dealing with supply of water		
	(c) Dues to departments dealing with supply of electricity		
	(d) Dues to departments dealing with telephones		
	(e) Dues to department dealing with government transport (including aircrafts and helicopters)		
	(f) Other dues, if any.		
(b)	(i) Income Tax including surcharge (Also indicate the assessment year up to which Wealth 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		

4. My Educational qualifications are as under:
 (GIVE DETAILS OF SCHOOL AND UNIVERSITY EDUCATION)

Sl. No	Name of Course	Year of Completion	School/College/University
1			
2			
3			
4			

DEPONENT

VERIFICATION

I, the deponent above named, 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 there from.

Verified at _____ this the _____ day of _____ 2024.

DEPONENT

VERIFICATION

The above affidavit is duly sworn before me by the Candidate/Deponent

Place :

Date :

Magistrate of the 1st Class/
Commissioner of Oath
(Seal)

ANNEXURE II

AFFIDAVIT TO BE FURNISHED BY CANDIDATE ABOUT HIS/HER
ANTECEDENT ALONG WITH NOMINATION PAPER

Before the Returning Officer
for By-Election to the 07-Chakhei MDC Constituency within
MARA AUTONOMOUS DISTRICT COUNCIL, 2024

I, _____ son/daughter/wife of _____
aged about _____ years, resident of _____, being candidate at the
above election, do hereby solemnly affirm/state on oath as under:-

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

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

- (i) Case / First Information Report No/Nos. _____
- (ii) Police Station(s) _____ District(s) _____ State(s)

- (iii) Section(s) of the concerned Act(s) and short description of the offence(s) for which the candidate has been charged _____
- (iv) Court(s) which framed the charge(s) _____
- (v) Date(s) on which the charge(s) was/were framed _____
- (vi) Whether all or any of the proceeding(s) have been stayed by any court(s) of competent jurisdiction _____

2. I have been / have not been convicted of an offence(s) [other than any offences] referred to in Rule 211-221 of the Mara Autonomous District Council (Constitution, Conduct of Business, etc) Rules, 2002 as amended and 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 convicted and punished as aforesaid, he shall furnish the following information.

- (i) Case / First Information Report No/Nos. _____
- (ii) Court(s) which punished _____
- (iii) Police Station(s) _____ District(s) _____ State (s)

- (iv) Section(s) of the concerned Act(s) and short description of the offence(s) for which the candidate has been charged _____
- (v) Date(s) on which the sentence(s) was/were pronounced _____
- (vi) Whether the sentence(s) have been stayed by any court(s) of competent jurisdiction _____

Place _____

Date _____

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 _____ this the _____ day of _____ 20.....

Signature of Deponent

Note : "The columns in this Form which are not applicable to the deponent may be struck off."