

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

20.1.22
2.51 PM

ଜଗଦୀଶ୍ଵର ଜିଲ୍ଲାର ଜିଲ୍ଲା ପରିଷଦ ନିମନ୍ତେ ନିର୍ବାଚନ ।

ମୁଁ ଜିଲ୍ଲା ପରିଷଦ ନିର୍ବାଚନ ନିମନ୍ତେ ଜଗଦୀଶ୍ଵର-ଟ ପଞ୍ଚାୟତ-ଟ ପରିଷଦ ନିର୍ବାଚନ ମଣ୍ଡଳୀରୁ ନିମ୍ନଲିଖିତ ବ୍ୟକ୍ତିଙ୍କୁ ପ୍ରାର୍ଥୀ ଭାବରେ ମନୋନୀତ କରୁଅଛି ।

ପ୍ରାର୍ଥୀଙ୍କ ନାମ ବିନୟ କଳାମାତ୍ରା

ପିତା/ପତିଙ୍କ ନାମ ଶ୍ରୀରାମ କଳାମାତ୍ରା

ତାଙ୍କର ଡାକ ଠିକଣା ସା-ସିଦ୍ଧକୁଶଳ-ଟ, ଚା-ପିଆଣା, ପା-ଅରୁଣାପୁର, ଜଗଦୀଶ୍ଵର

ଜଗଦୀଶ୍ଵର, ପଞ୍ଚାୟତ-ଟ ପରିଷଦ ନିର୍ବାଚନ ମଣ୍ଡଳୀର ଭୋଟର ତାଲିକାରେ ତାଙ୍କ ନାମ ଦରଜ ହୋଇଥିବା ଶ୍ରୀ.ଏ-ଏଚ୍.ଏଚ୍.ଏଚ୍.ଏଚ୍.ଏଚ୍-ଟ କ୍ରମିକ ସଂଖ୍ୟା ୯

ମୋର ନାମ ବିନୟ ଦାସ ଅଟେ ଏବଂ ଜଗଦୀଶ୍ଵର, ପଞ୍ଚାୟତ-ଟ ପରିଷଦ ନିର୍ବାଚନ ମଣ୍ଡଳୀର ଭୋଟର ତାଲିକାର କ୍ରମିକ ସଂଖ୍ୟା ଶ୍ରୀ.ଏ-ଏଚ୍.ଏଚ୍.ଏଚ୍.ଏଚ୍.ଏଚ୍-ଟ emr ରେ ତାହା ଦରଜ କରାହୋଇଅଛି ।

ତାରିଖ ୨୦.୦୧.୨୨

ପ୍ରତ୍ୟାବଳ୍ପ ସ୍ଵାକ୍ଷର

ମୋର ନାମ ସୁନୀଲ ଦାସ ଅଟେ ଏବଂ ଜଗଦୀଶ୍ଵର, ପଞ୍ଚାୟତ-ଟ ପରିଷଦ ନିର୍ବାଚନ ମଣ୍ଡଳୀର ଭୋଟର ତାଲିକାର କ୍ରମିକ ସଂଖ୍ୟା ଶ୍ରୀ.ଏ-ଏଚ୍.ଏଚ୍.ଏଚ୍.ଏଚ୍.ଏଚ୍-ଟ

ରେ ତାହା ଦରଜ ହୋଇଅଛି ।

ତାରିଖ ୨୦.୦୧.୨୨

ପ୍ରତିପଦ ସ୍ଵାକ୍ଷର

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

- (କ) ମୋର ବୟସ ୫୭ ବର୍ଷ ସଂପୂର୍ଣ୍ଣ ହୋଇଅଛି ।
- * (ଖ) ମୁଁ ସୁନୀଲ ଦାସ ଦଳଦ୍ଵାରା ଏହି ନିର୍ବାଚନରେ ଛିଡା ହୋଇଛି ।
- (ଗ) ପସନ୍ଦ ହେଉଥିବା ସଂକେତ, ପସନ୍ଦ କ୍ରମରେ (i) ଦାସ
- (ii) ଏବଂ (iii)

(ଘ) ମୋର ଏବଂ ମୋର ପିତା/ପତିଙ୍କର ନାମ ଉପରେ ଉଦିଆ ଦ୍ଵାରା
..... (ଭାଷାର ନାମ) ଠିକ୍ ଭାବରେ ବନାନ କରାଯାଇଛି ।

(ଙ) ମୋର ଜ୍ଞାନ ଓ ବିଶ୍ଵାସ ଅନୁଯାୟୀ ମୁଁ ପ୍ରାର୍ଥୀ ହେବା ପାଇଁ ଯୋଗ୍ୟ ଏବଂ ଯଦି ମୋତେ ଉପସ୍ଥାପନ
ଉପସ୍ଥାପନ - ୪ ଜିଲ୍ଲାର ଜିଲ୍ଲା ପରିଷଦର ଆସନ ପୂରଣ ନିମନ୍ତେ ପସନ୍ଦ କରାଯାଏ ତେବେ ମୁଁ
ଅଯୋଗ୍ୟ ନୁହେଁ ।

ପୁନଶ୍ଚ ମୁଁ ଘୋଷଣା କରୁଅଛି ଯେ ମୁଁ
** ଜାତି/ଜନଜାତିର ସଦସ୍ୟ ଯାହାକି ଓଡ଼ିଶା ରାଜ୍ୟର ଅନୁସୂଚିତ ଜାତି/ଅନୁସୂଚିତ ଜନଜାତି/ପଛୁଆବର୍ଗ ନାଗରିକ
ଅଟେ ।

ତାରିଖ ୨୦.୦୧.୨୨

ଉଦିଆ ଦ୍ଵାରା
ପ୍ରାର୍ଥୀଙ୍କ ସ୍ଵାକ୍ଷର

* ପ୍ରଯୋଜ୍ୟ ହେଉନଥିବା ପାରାକୁ କାଟି ଦିଅନ୍ତୁ ।

** ପ୍ରଯୋଜ୍ୟ ହେଉନଥିବା ଶବ୍ଦକୁ କାଟି ଦିଅନ୍ତୁ ।

(ନିର୍ବାଚନ ଅଧିକାରୀଙ୍କଦ୍ଵାରା ପୂରଣ ଲାଗି)

ମନୋନୟନ ପତ୍ର କ୍ରମିକ ସଂଖ୍ୟା ୦୩

ଏହି ମନୋନୟନ ପତ୍ର ମୋତେ ମୋର କାର୍ଯ୍ୟାଳୟରେ ୨୦/୦୧/୨୦୨୨

ତାରିଖରେ ୧୨:୦୨:୫୧ ମି. ସମୟରେ ପ୍ରାର୍ଥୀ/ପ୍ରସ୍ତାବକଙ୍କ ଦ୍ଵାରା ଦିଆଗଲା ।

ତାରିଖ ୨୦/୦୧/୨୦୨୨

ଉଦିଆ
୨୦.୦୧.୨୨
Sub-Coll. Officer-Cum-Election Officer
ନିର୍ବାଚନ ଅଧିକାରୀ
Jagatsinghpur

ନିର୍ବାଚନ ଅଧିକାରୀଙ୍କର ମନୋନୟନ ପତ୍ର ମଞ୍ଜୁର କରିବା ବା ନାମଞ୍ଜୁର କରିବା ନିଷ୍ପତ୍ତି

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

* ମନୋନୟନ ପତ୍ର ଗ୍ରାହ୍ୟ/ଅଗ୍ରାହ୍ୟ

ତାରିଖ

ନିର୍ବାଚନ ଅଧିକାରୀ

ଫାରମ ସଂଖ୍ୟା—3

[ନିୟମ 12(3) ଦ୍ରଷ୍ଟବ୍ୟ]

ଜମା ପରିମାଣର ରସିଦ୍

(କାର୍ଯ୍ୟାଳୟ ନକଲ)

01100

ସଂଖ୍ୟା...୧୦୦..... ତାରିଖ ୨୦.୧.୨୦୨୨..

ଶ୍ରୀ/ଶ୍ରୀମତୀ ରମେଶ ଚନ୍ଦ୍ର ମହାପାତ୍ର...ଠାରୁ

ପରିଷଦର ସଭ୍ୟ ପଦର ପ୍ରାର୍ଥନା ନିମନ୍ତେ ଜମା ଦିଆଯାଇଥିବା

ଅମାନତ ଟ...୨୦୦.୦୦.....(ଅକ୍ଷରରେ)

ଟଙ୍କା...ପୁଞ୍ଜି ଟଙ୍କା.....) ମାତ୍ର

...ଦିନିଆ-ଟ.....ଜିଲ୍ଲା ପରିଷଦ

ପାଇଁ ଗ୍ରହଣ କଲୁ ।

ନି.ମାତୁକି-ଟ

ନିର୍ବାଚନ ଅଧିକାରୀ



ଓଡ଼ିଶା ଓଡ଼ିଶା ODISHA

08AA 733468

IN THE COURT OF THE EXECUTIVE MAGISTRATE / NOTARY

JAGATSINGHPUR

AFFIDAVIT

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

*For election to the office of Sarapanch of NIL G.P. in
 Block of NIL District/ Member of
 P.S. of _____ District / Member of
Jagatsinghpur - 44 Zilla Parishad of Jagatsinghpur District/ Corporator
 of _____ Municipal Corporation of _____ District /
 Councillor of _____ Municipality / NAC of _____ District.

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

I Kailash Kalapahada aged about 57 years, son/daughter/
 wife of Shriram Kalapahada candidate at the above election, do
 hereby 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)



Contd P/2

Kailash Kalapahada



ଓଡ଼ିଶା ओडिशा ODISHA

(2)

09AA 324046

(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):

(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: _____

(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 discharge/acquittal)

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

(i) Section of the Act and description of the offence for which cognizance taken:

Sm _____ NIL _____

(ii) The Court which had taken cognizance:

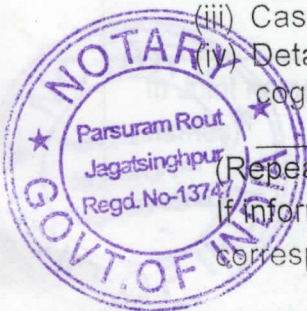
_____ NIL _____

(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 off the Sub-columns below.



Kailash Kalapahad



ଓଡ଼ିଶା ओडिशा ODISHA

08AA 734078

(3)

2. That, I/ my spouse / my dependants*** own the following immovable properties:

(A)

Agricultural Land(s)	Location	Area	Approx. present Market Value according to you
Urban Land(s)	Location	Area	
Self name KAILAS KALAPAHADA	NIL	NIL	NIL
Spouse (Give name)	NIL	NIL	NIL
Dependant son(s)[Give name(s)]	NIL	NIL	NIL
Dependant daughter(s)[Give name(s)]	NIL	NIL	NIL
Dependant (others) (Give name and relationship)	NIL	NIL	NIL
In Joint name(s)(Give Particulars)	NIL	NIL	NIL



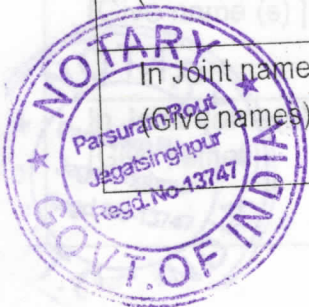


ଓଡ଼ିଶା ओडिशा ODISHA

08AA 733270

3. (A) That, I/my spouse / my dependants** (4) on the following movable property

2. (B)	Motor vehicle with	Approx. present value according to you	Gold & gold ornaments; other	Approx. present value according to you	Silver & silver	Approx. present Market Value according to you
Urban Land(s)			Location	Area		
Self name			NIL	NIL		NIL
Spouse (Give name) "			NIL	NIL		NIL
Dependant son(s)[Give name(s)]			NIL	NIL		NIL
Dependant daughter(s)[Give name(s)]			NIL	NIL		NIL
Dependant (others) (Give name and relationship)			NIL	NIL		NIL
In Joint name(s) (Give names)			NIL	NIL		NIL



Contd.P/5

Contd.P/6



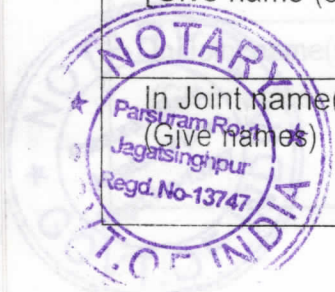
ଓଡ଼ିଶା ओडिशा ODISHA

(5)

08AA 733318

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 totals/gram / carat)	Approx. present market value according to you	Silver & silver ornaments (In tolas/ grams)	Approx. present market value according to you
Self name Kailas Kalapahada	NIL	NIL	NIL	NIL	NIL	NIL
Spouse(Give name)	NIL	NIL	NIL	NIL	NIL	NIL
Dependantson(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





ଓଡ଼ିଶା ओडिशा ODISHA

(6)

08AA 733328

3. (B) That, I/my spouse 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 Kalesh K. Kalapacheda	NIL	NIL	Union Bank, Balasudha	Rs-2251/-	NIL	NIL
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 and relationship)	NIL	NIL	NIL	NIL	NIL	NIL
In Joint name(s) (Give names)	NIL	NIL	NIL	NIL	NIL	NIL





ଓଡ଼ିଶା ओडिशा ODISHA

(7)

08AA 733391

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

Details of University	Government Dues		Income Tax Dues	Dues to Financial Institutions	Any other Dues
	Details of the nature of demand/dues	Amount			
1. Karles 2. Gadak			NIL	NIL	NIL
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	NIL
In Joint name(s) (Give names)		NIL	NIL	NIL	NIL



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



ଓଡ଼ିଶା ओडिशा ODISHA

08AA 733452

5. My Educational qualification are as under :
 Details of School : H.S.C. pass - Kunja Bihari High School, Nuagan

Details of University :

VERIFICATION

I, Kailash Kalapahada Age about 57 years s/o - Shriram Kalapahada
 At- Gadakuang, P.O.- Gadakuang
 P.S.- Kuang Dist.- Jagatsinghpur, 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 Jagatsinghpur this the 20th January, 2022.



Kailash Kalapahada
 Deponent

Witnesses:

- Pudap Das, Paragis Das, Chakr Karanig
- B. Neosang, H.T.B. J.S. Par
ପ୍ରମୋଦ କୁମାର, ବନମାଳୀ କୁମାର, ଶ୍ରୀମତୀ - ବସନ୍ତକାନ୍ତ
କୋଣାର୍କ, କଟକ

Signed before me

Identified by
 Advocate

20-1-22
Suresh Kumar
(Adv)
J.P.H.

20/1/22
 Executive Magistrate/Notary
 Jagatsinghpur
 Parsuram Rout
 Notary, Jagatsinghpur
 Odisha, India

FORM No. 18

[See Rule 14 (4)]

To

The Election Officer

In respect of Jagatsingpur-4, Erasama-4
Zilla Parishad Constituency

Sir,

Having been authorised by the President/General Secretary of the State Level/
National Political Party, namely Bahujan Samaj party Party, I hereby give
notice that the following person(s) has/have been sponsored by Kailash Kalapahada
party as its candidate(s) at the ensuing Zilla Parishad Election and
that elephant 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	<u>Jagatsingpur-4</u>	<u>Kailash Kalapahada</u>	<u>Srirama Kalapahada</u>	<u>at - Gadakeyanga</u>
2	<u>Erasama-4</u>			<u>po - Nuagem</u>
3.				<u>PS - Abhaya chand pur</u>
4.				<u>Dist - Jagatsingpur</u>
5.				

Bibhut' Bhushan Majhi
Yours faithfully,

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

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