

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

20.1.22  
1.50 PM

କମଳାକାନ୍ତ ପୁଅ

ଜିଲ୍ଲାର ଜିଲ୍ଲା ପରିଷଦ ନିମନ୍ତେ ନିର୍ବାଚନ ।

ମୁଁ ଜିଲ୍ଲା ପରିଷଦ ନିର୍ବାଚନ ନିମନ୍ତେ ..... ୨୪-କିମ୍ବି-୦୨ ପରିଷଦ ନିର୍ବାଚନ ମଣ୍ଡଳୀରୁ ନିମ୍ନଲିଖିତ

ବ୍ୟକ୍ତିଙ୍କୁ ପ୍ରାର୍ଥୀ ଭାବରେ ମନୋନୀତ କରୁଅଛି ।

ପ୍ରାର୍ଥୀଙ୍କ ନାମ ..... ମନୋଜ କୁମାର ମହାପାତ୍ର

ପିତା/ପତିଙ୍କ ନାମ ..... ଦେବୀ ପ୍ରମିଳା ମହାପାତ୍ର

ତାଙ୍କର ଡାକ ଠିକଣା ..... ଶା.ନା- ୧୫୫୩, ଗ୍ରା.ନ- କିମ୍ବି, ବି. କମଳାକାନ୍ତ ପୁଅ

୨୪

ପରିଷଦ ନିର୍ବାଚନ ମଣ୍ଡଳୀର ଭୋଟର ତାଲିକାରେ ତାଙ୍କ ନାମ ଦରଜ ହୋଇଥିବା

କ୍ରମିକ ସଂଖ୍ୟା ..... ୩୮ ଭୁବନେଶ୍ୱର-୦୩

ମୋର ନାମ ..... ଦେବୀ ପ୍ରମିଳା ମହାପାତ୍ର ଅଟେ ଏବଂ ..... ୨୪-କିମ୍ବି-୦୨

ପରିଷଦ ନିର୍ବାଚନ ମଣ୍ଡଳୀର ଭୋଟର ତାଲିକାର କ୍ରମିକ ସଂଖ୍ୟା ..... ୧୦୨ ଭୁବନେଶ୍ୱର-୧୧ ରେ ତାହା

ଦରଜ କରାହୋଇଅଛି ।

ନିର୍ବାଚନ ସ୍ଥଳ

ତାରିଖ ..... ୨୦.୦୧.୨୦୨୨

ପ୍ରସ୍ତାବକଙ୍କ ସ୍ୱାକ୍ଷର

ମୋର ନାମ ..... ଅକ୍ଷୟ କୁମାର ଅଟେ ଏବଂ ..... ୨୪-କିମ୍ବି-୦୨

ପରିଷଦ ନିର୍ବାଚନ ମଣ୍ଡଳୀର ଭୋଟର ତାଲିକାର କ୍ରମିକ ସଂଖ୍ୟା ..... ୧୧୪ ଭୁବନେଶ୍ୱର-୧୨ ରେ ତାହା ଦରଜ

ହୋଇଅଛି ।

ନିର୍ବାଚନ ସ୍ଥଳ

ତାରିଖ ..... ୨୦.୦୧.୨୦୨୨

ସମର୍ଥକଙ୍କ ସ୍ୱାକ୍ଷର

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

(କ) ମୋର ବୟସ ..... ୪୨ ବର୍ଷ ସଂପୂର୍ଣ୍ଣ ହୋଇଅଛି ।

\* (ଖ) ମୁଁ ..... ଆମ୍ଭ ଆଦମି ପକ୍ଷ ଦଳଦ୍ୱାରା ଏହି ନିର୍ବାଚନରେ ଛିଡା ହୋଇଅଛି ।

(ଗ) ପସନ୍ଦ ହେଉଥିବା ସଂକେତ, ପସନ୍ଦ କ୍ରମରେ (i) ..... ୧୨

(ii) ..... ଏବଂ (iii) .....

(ଘ) ମୋର ଏବଂ ମୋର ପିତା/ପିତାଙ୍କ ନାମ ଉପରେ ..... ବିଜିପା .....  
..... (ଭାଷାର ନାମ) ଠିକ୍ ଭାବରେ ବନ୍ଦୀ କରାଯାଇଛି ।

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

ପୁନଶ୍ଚ ମୁଁ ଘୋଷଣା କରୁଅଛି ଯେ ମୁଁ ..... ସା/ପା/ପ୍ରଦର୍ଶକ .....  
\*\* ଜାତି/ଜନଜାତିର ସଦସ୍ୟ ଯାହାକି ଓଡ଼ିଶା ରାଜ୍ୟର ଅନୁସୂଚିତ ଜାତି/ଅନୁସୂଚିତ ଜନଜାତି/ପଞ୍ଚୁଆବର୍ଗ ନାଗରିକ  
ଅଟେ ।

ତାରିଖ ..... ୨୦.୦୧.୨୦୨୨ .....

ମନୀରଞ୍ଜିତ ମହାପାତ୍ର  
ପ୍ରାର୍ଥୀଙ୍କ ସ୍ୱାକ୍ଷର

\* ପ୍ରଯୋଜ୍ୟ ହେଉନଥିବା ପାରାକୁ କାଟି ଦିଅନ୍ତୁ ।

\*\* ପ୍ରଯୋଜ୍ୟ ହେଉନଥିବା ଶବ୍ଦକୁ କାଟି ଦିଅନ୍ତୁ ।

(ନିର୍ବାଚନ ଅଧିକାରୀଙ୍କଦ୍ୱାରା ପୂରଣ କାରି)

ମନୋନୟନ ପତ୍ର କ୍ରମିକ ସଂଖ୍ୟା ..... ୦୩ .....

ଏହି ମନୋନୟନ ପତ୍ର ମୋତେ ମୋର କାର୍ଯ୍ୟାଳୟରେ ..... ୨୦/୦୧/୨୦୨୨ .....

ତାରିଖରେ ୧୧.୦୧.୨୦୨୨ ..... ସମୟରେ ପ୍ରାର୍ଥୀ/ପ୍ରସ୍ତାବକଙ୍କ ଦ୍ୱାରା ଦିଆଗଲା ।

ତାରିଖ ..... ୨୦/୦୧/୨୦୨୨ .....

[Signature]  
ନିର୍ବାଚନ ଅଧିକାରୀ  
Sub-Collector-Cum-Election Officer  
Jagatsinghpur

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

ଫାରମ ସଂଖ୍ୟା—3

[ ନିୟମ 12(3) ଦ୍ରଷ୍ଟବ୍ୟ ]

ଜମା ପରିମାଣର ରସିଦ୍

(କାର୍ଯ୍ୟାଳୟ ନକଲ)

01059

ସଂଖ୍ୟା.....୫୮..... ତାରିଖ.....୧୮.୧.୨୦୨୨

ଶ୍ରୀ/ଶ୍ରୀମତୀ.....ମାତା.....ମାତା.....୦।୧୧

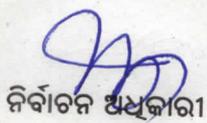
ପରିଷଦର ସଭ୍ୟ ପଦର ପ୍ରାର୍ଥନା ନିମନ୍ତେ ଜମା ଦିଆଯାଇଥିବା  
ଅମାନ୍ତ ଟ.....୨୦୦-୦୦.....(ଅକ୍ଷରରେ)

ଟଙ୍କା.....ପୁଞ୍ଜିର ବିଷୟ.....) ମାତ୍ର

.....କିଛି.....) ଜିଲ୍ଲା ପରିଷଦ

ପାଇଁ ଗ୍ରହଣ କଲୁ ।

ନି.ମାତ୍ର-୨୪



ନିର୍ବାଚନ ଅଧିକାରୀ





ଓଡ଼ିଶା, ओडिशा, ODISHA

(2)

09AA 205230

(vi) Details of appeal/ revision etc. against conviction

\_\_\_\_\_

(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

\_\_\_\_\_

(ii) The Court which had 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 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: \_\_\_\_\_

\_\_\_\_\_

(ii) The Court which had taken cognizance: \_\_\_\_\_

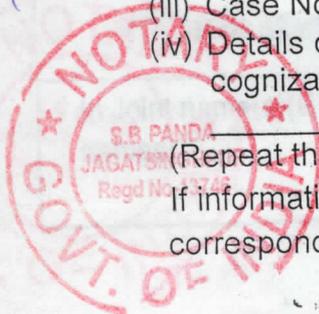
(iii) Case No: \_\_\_\_\_

(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 off the Sub-columns below.

*Handwritten signature and date:*  
19.1.2022





म. न. २०११ न. २१११११

ଓଡ଼ିଶା ଆଡିशा ODISHA

(3)

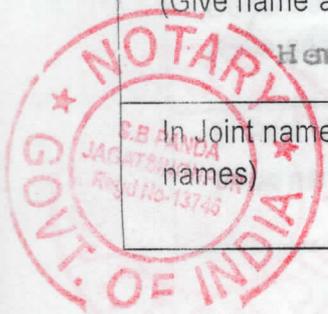
09AA 205244

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
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)	Ganesadhar Mohapatra (Father)	UkundaRa Ac. 1.00	Rs. 50,000/-
	Raghunath Mohapatra (mother)	Ac. 1.50 dec.	Rs. 75,000/-
	Hemalata Mohapatra (mother)	UkundaRa Ac. 0.15 dec.	Rs. 6,000/-
In Joint name(s)(Give names)	Nil	Nil	Nil

*Handwritten signature and date: 19.11.2022*



✓ Manoranjan Mohapatra



ଓଡ଼ିଶା ओडिशा ODISHA

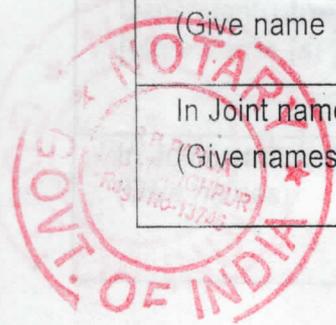
09AA 205338

(4)

2. (B)

Urban Land(s)	Location	Area	Approx. present Market Value according to you
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

*[Handwritten signature and date]*  
19.1.2022





अज्ञात दिन मंगल

ଓଡ଼ିଶା ओडिशा ODISHA

(5)

09AA 205473

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	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

19.11.2022



✓ Memorandum Notarized



ଓଡ଼ିଶା ओडिशा ODISHA

(6)

09AA 205367

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 Manoranjan Mohapatra.	NIL	NIL	NIL	NIL	IIC	Rs. 1,00,000/-
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 and relationship)	NIL	NIL	NIL	NIL	NIL	NIL
In Joint name(s) (Give names)	NIL	NIL	NIL	NIL	NIL	NIL

*Manoranjan Mohapatra*  
19.11.2022



Contd.P/7



ଓଡ଼ିଶା ओडिशा ODISHA

(7)

09AA 205419

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					
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.



मनोरंजन महापात्र

ଓଡ଼ିଶା ओडिशा ODISHA

09AA 205487

(8)

5. My educational qualification are as under: H.S.C. Examination passed- 1990  
Jayantiram High School, Besandara.  
 (Give the details of School & University Education)  
13 Arts in D.K.H. College, Branch, Cuttack, under Utkal University.  
passed:- 1995.

I Manoranjan Mohapatra

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 19th day of January 2022.

मनोरंजन महापात्र  
 Manoranjan Mohapatra  
 Deponent

Witnesses :

1. श्री. अनखिता भैर  
श्री. अनखिता भैर  
श्री. अनखिता भैर

Identified by

Advocate

2. Anakhita Bheri  
g/or Nata . Bheri  
At/Do - Ukundana.

19/01/2022  
Manoranjan Mohapatra

SIGNED BEFORE ME



At/Do - Jagatsinghpur.

19/01/2022  
 Sanyabrata Panda  
 Notary Jagatsinghpur  
 Executive Magistrate / Notary  
 Jagatsinghpur India



ELECTION COMMISSION OF INDIA

ଭାରତୀୟ ନିର୍ବାଚନ କମିଶନ

IDENTITY CARD OR/07/038/160100

ପରିଚୟ ପତ୍ର



Elector's Name : Manoranjan Mohapatra  
 ଭୋଟରଙ୍କ ନାମ : ମନୋରଞ୍ଜନ ମହାପାତ୍ର  
 Father's/Mother's/  
 Husband's Name : F - Gangadhar Mohapatra  
 ପିତା/ମାତା/ସ୍ୱାମୀଙ୍କ ନାମ : ଫି - ଗଙ୍ଗାଧର ମହାପାତ୍ର  
 Sex / ଲିଙ୍ଗ : Male ପୁରୁଷ  
 Age as on 1.1.1994 : 18  
 ୧.୧.୧୯୯୪ ରେ ବୟସ : ୧୮

Address :  
 Vill./Ward : Ukundara  
 G.P./Town : Manguli  
 P.S. : Jagatsinghpur  
 Dist. : Jagatsinghpur

ଠିକଣା :  
 ଗ୍ରାମ/ଞ୍ଚାଳ : ଉକୁନ୍ଦରା  
 ଗ୍ରାମ/ସହର : ମଙ୍ଗୁଲି  
 ଥାନା : ଜଗତସିଂହପୁର  
 ଜିଲ୍ଲା : ଜଗତସିଂହପୁର

This card can be used as an Identity Card under different Government Programmes.

ଏହି ପରିଚୟ ପତ୍ର ବିଭିନ୍ନ ସରକାରୀ ଯୋଜନାରେ ପରିଚୟ ପତ୍ର ରୂପେ ବ୍ୟବହାର କରାଯାଇପାରିବ ।

Jagatsinghpur  
 ଜଗତସିଂହପୁର  
 31/12/94  
 ୩୧/୧୨/୯୪

Facsimile Signature of  
 Electoral Registration Officer  
 for Jagatsinghpur (SC) A.C.  
 ଜଗତସିଂହପୁର (ଏ.ସି.ସି.)  
 ବିଧାନସଭା ନିର୍ବାଚନ ମଣ୍ଡଳୀର ନିର୍ବାଚନ-  
 ରେଜିଷ୍ଟ୍ରାରର ଅଧିକାରୀ ଦସ୍ତଖତ

ମନୋରଞ୍ଜନ ମହାପାତ୍ର

**FORM No. 18**  
[See Rule 14 (4)]



To  
The Election Officer  
In respect of 24-BIRIDI-2  
Zilla Parishad Constituency, JAGATSINGHPUR

Sir,

Having been authorised by the President/General Secretary of the State Level/National Political Party, namely AAM AADMI PARTY Party, I hereby give notice that the following person(s) has/have been sponsored by AAM AADMI PARTY party as its candidate(s) at the ensuing Zilla Parishad Election and that BROOM (JHAADU) 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>24-BIRIDI-2</u>	<u>- MANORANJAN MOHAPATRA -</u>	<u>GANGADHAR MOHAPATRA</u>	<u>VILL-UKUNDARA GP-MANGULI PS-JAGATSINGHPUR DIST-JAGATSINGHPUR</u>
2.	<u>JAGATSINGHPUR</u>			
3.				
4.				
5.				

Yours faithfully,

Chandra bhanu Mantri (CHANDRA BHANU MANTRI)  
(Name and signature of the person)

**OFFICE SECRETARY**  
**AAM AADMI PARTY**  
**ODISHA**  
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.

**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 persons (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	Nishikanta Mohapatra State Convenor	All Zilla Parishad	<i>Nishikanta Mohapatra</i>	<i>[Signature]</i>
2	Soumya Ranjan Swain General Secretary	All Zilla Parishad	<i>Soumya Ranjan Swain</i>	<i>[Signature]</i>
3	Chandra Bhanu Mantri Office Secretary	All Zilla Parishad	<i>Chandrabhanu Mantri</i>	<i>[Signature]</i>

Yours faithfully,

*[Signature]*



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

Name of the Party **AAM AADMI PARTY**

(Seal of the party)

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

ସମ୍ପର୍କିତ ସୂଚୀ