


 4 APR 2009
 Special Adhesive Stamp
 KARNATAKA

Form 25
1500-BE-CA1

Affidavit to be furnished by the candidate before the returning officer for election to
Legislative Assembly (name of the House) from 160 Kakinada city
 (constituency name of the constituency)

KASAPU SRIKUMARAO, son/daughter/wife of MADGE SESHAN RAO aged about
38 years, resident of 110 A.R.P. P.O. near Nagri, Kakinada
 candidate at the above election, do hereby solemnly affirm/avow 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 shall furnish the following information :

- (i) Case/Fist information report No./Nos. will
- (ii) Police station(s) will District (s) will State(s) will
- (iii) Section(s) of the concerned Act(s) and short description of the offence(s) for which the candidate has been charged will
- (iv) Court(s) which framed the charge(s) will
- (v) Date(s) on which the charge(s) was/were framed will
- (vi) Whether all or any of the proceeding(s) have been stayed by any court(s) of competent jurisdiction will

2. I have been/have not been convicted of an offence(s) [other than any offence(s) referred to in 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/Fist information report No./Nos. will
- (ii) Court(s) which punished will
- (iii) Police station(s) will District (s) will State(s) will
- (iv) Section(s) of the concerned Act(s) and short description of the offence(s) for which the candidate has ever been charged will

ATTESTED

Ch. Panduranga Rao
 2364657
CH. PANDURANGA RAO
 ADVOCATE M.A. 21.
 C.No. 38-4-7-2 Muranar Nilayam
 Tink Street, KAKINADA - 7.



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- (v) Date(s) on which the sentence(s) was/were pronounced Nil
(vi) Whether the sentence(s) has/has been stayed by any court(s) of competent jurisdiction Nil

Place Kakinada

Date: 4/4/09

R. Srinivas
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 Kakinada this 4 day of 4 2009

R. Srinivas
Signature of deponent

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

ATTESTED

4 APR 2009

Ch. PANDURANGA RAO

ADVOCATE

D.No. 38-4-72, Murahari Nilayam
Tilak Street, KAKINADA - 7.

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NOTARIAL



- (2) That I give herein below the details of the assets (immovable, movable, bank balance, etc.) of spouse, my dependants and myself*:

A. Details of Movable Assets:

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

S. No.	Description	Self	Spouse(s) Name(s):	Dependent-1 Name:	Dependent-2 Name:	Dependent-3, etc. Name:
(i)	Cash	20,000	will	will	will	will
(ii)	Deposits in Banks, Financial Institutions and Non-Banking Financial Companies	will	will	will	will	will
(iii)	Bonds, Debentures and Shares in Companies	will	will	will	will	will
(iv)	Other Financial Instruments NSS, Postal Savings, LIC Policies, etc.	will	will	will	will	will
(v)	Motor Vehicles (details of make, etc.)	will	will	will	will	will
(vi)	Jewellery (give details of weight and value)	will	will	will	will	will
(vii)	Other Assets, such as values of claims/interests	will	will	will	will	will

Notes— 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 substantially dependent on the income of the candidate.

E. Details of Immovable Assets:

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

S. 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	will	will	will	will	will
(ii)	Non-Agricultural Land - Location(s) - Survey Number(s) - Extent (Total measurement) - Current market value	will	will	will	will	will
(iii)	Buildings (commercial and residential) - Location(s) - Survey / Door Number(s) - Extent (Total measurement) - Current market value	will	will	will	will	will
(iv)	Houses / Apartments, etc. - Location(s) - Survey / Door Number(s) - Extent (Total measurement) - Current market value	will	will	will	will	will
(v)	Others (such as interest in property)	will	will	will	will	will

(3) I give herein below the details of my liabilities / overdues to Public Financial Institutions and Government dues :-

(Note : Please give separate details for each item)

S.No.	Description	Name and address of Bank / Financial Institution (s) / Department (s)	Amount outstanding as on
(a)	(i)	Loans from Banks	will
	(ii)	Loans from Financial Institutions	will
	(iii)	Government dues :-	will
	(a)	Dues to departments dealing with Government accommodation	will
	(b)	Dues to departments dealing with supply of water	will
	(c)	Dues to departments dealing with supply of electricity	will
	(d)	Dues to departments dealing with telephones	will
	(e)	Dues to departments dealing with government transport (including aircrafts and helicopters)	will
	(f)	Other dues if any	will
S.No.	Description	Name and address of Bank / Financial Institution (s) / Department (s)	Amount outstanding as on
(b)	(i)	Income Tax including surcharge [(Also indicate the assessment year upto which Income Tax Return filed. Give also Permanent Account Number (PAN)]	will
	(ii)	Wealth Tax (Also indicate the assessment year upto which Wealth Tax return filed.)	will
	(iii)	Sales Tax (Only in case of proprietary Business)	will
	(iv)	Property Tax	will

(4) My educational qualifications are as under—

(GIVE DETAILS OF SCHOOL AND UNIVERSITY EDUCATION)

(Name of School / University and the year in which the course was completed should also be given.)

B.A. Andhra University

K. Sundar

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 therefrom.

Verified at Kakinada this the 4 day of 4 20009 *K. Sundar*

DEPONENT

ATTESTED

4 APR 2009

K. Sundar
CH. TANDURANGA RAO
M.A.B.L.

ADVOCATE
D.No. 38-4-712, Marudhanipuram
Tenn Street, KAKINADA - 1.

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