

मिज़ोरम MIZORAM

00AA 207455

Conduct of Election Rules -1961 (Statutory Rules and Orders)

> FORM 26 (See Rule 4A)

### **AFFIDAVIT**

8	1 1 0		1. 1.10 0		nstituency
5	about &	ROTHERON , son/da	aughter/wife of	16740	HEURIA
		years, resident of election, do hereby sole			
100		pending case(s) in which	See		
IF th	ourt(s) of compete e deponent is acc mation:	ent jurisdiction. cused of any such offen	nce(s) he shall	furnish the	following
If th	e deponent is acc mation:	cused of any such offer		furnish the	following
If the information (i)	e deponent is acc mation: Case/First infor	cused of any such offer	Nil		following
If th iufor (i) (前)	e deponent is acc mation: Case/First infor	mation report No/Nos	Nil		following
If the information (i)	c deponent is accomation:  Case/First infor Police Station(s State(s)	mation report No/Nos	District(s)	Nil	

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(v)		V	
			ge(s) doe, m) oney
(vi)	Wheth	er all or any of the pr	roceeding(s) have been stayed by any court(s) of
	compe	tent jurisdiction	does not once.
tion 8	d to in of the	sub-section(1) or su	onvicted of an offence(s) other than any offence(s)-section(2), or covered in sub-section(3), of section(4), of section(5), of section(6), of 1951 and sentenced (6)
			unished as aforesaid, he shall furnish the followir not convicted and/or punished in any case.
Place	C	hamphai 1.11.08	Signature of Deponent
Date	7	7.11.08	Signature of Deponent
		named deponent, do	
affida false	vit are and not	named deponent, do true and correct to th hing material has bee	hereby verify and declare that the contents of the he best of my knowledge and belief, no part of it en concealed therein.
affida false	vit are and not ed at _	named deponent, do true and correct to th hing material has bee Champhai	hereby verify and declare that the contents of the best of my knowledge and belief, no part of it en concealed therein.
affida false Verif depo	The anent	named deponent, do true and correct to th hing material has bee Champhai  bove affidavit is dul	hereby verify and declare that the contents of the best of my knowledge and belief, no part of it en concealed therein.
depo	The anent	named deponent, do true and correct to th hing material has bee	hereby verify and declare that the contents of the best of my knowledge and belief, no part of it en concealed therein.  this Seventh day of Nev, 20  Signature of Deponent



मिम्रीरम MIZORAM

ANNEXURE - I

00AA 207453

### AFFIDAVIT TO BE FURNISHED BY CANDIDATE ALONGWITH NOMINATION PAPER

### AFFIDAVIT

Before the Returning Officer

for election to the Mizoram Legislative Assembly from 25-Fast Twow(ST) constituency

aged 56 years, resident of Romikaton, Touchief, Arzauf, candidate at the above election, do hereby solemnly affirm and state on oath as under:

- (1) The following cases is/are pending against me in which cognizance has been taken by the court :- NIL
  - Section of the Act and description of the offcence for which cognizance taken:
  - (ii) The Court which has taken cognizance:
  - (iii) Case No:
  - (iv) Date of order of the Court taking cognizance:
  - (v) Details of appeal(s)/application(s) of revision, etc., if any, filed against above order taking cognizance:
- That I give herein below the details of the assets (immovable, movable, bank balance, etc.) of myself, my spouse and dependents:

	DETAILS OF	DETAILS OF MOVEABLE ASSETS		Dr. R. ROTZ WANGA	4504)
scription	Self	Spouse(s) Name(s)	Dependent-1 Name	Dependent-2 Name	Dependent Name
*	Ro 4.	Khameythongpmi			
nks, Financial I Non-Banking Danies	@ Apra Buch Denorphin. At 105-7/543 = Ro 20157- @ NRO. Clandmany Me NO-41/3738=K01506/- @ Sal, Denorphin 134. At NO-10276769409 Ro 31, 253-68				
ures and shares in					
instruments, NSS, LIC Policies, etc.					
(details of make,	6462 super				
details of weight					
uch as values of					

( Dr. R. ROTCHAN

	cription	Self	Spouse(s) Name(s)	Dependent-1 Name	Dependent-2 Name	Dependent-3 Name
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(Dr. R. ROBLIANGA)

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	201200	( Dr. R. ROTHWATER	Morria	Rosauca

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Description	Self	Spouse(s) Name(s)	Dependent-1 Name	Dependent-2 Name	Dependent-3 Name
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in below the details of my liabilities/overdues to public financial institutions and government dues :-

Description	Name & address of Bank/ Financial institution(s) / Department(s)	Amount outstanding on
oans from Banks	2.5	nil -
oans from financial institutions		
overnment dues		
ues to departments dealing with government accomodation		
ues to departments dealing with supply of water		
ues to departments dealing with supply of electricity	•	
ues to departments dealing with telephones		
ues to departments dealing with government transport ncluding aircrafts and helicopters)		
ther dues, if any		

Car. R. ROTE WHILE

Description	Name & address of Bank/ Financial institution(s) / Department(s)	Amount outstanding as on
Tax including surcharge licate the Assessment year upto which Income Tax Return filed. Give manent Account Number (PAN)]	2	ni.
Tax licate the assessment year upto which Wealth Tax return filed]	ni	n.i
ex case of proprietary business]	~	-
Tax	ind	oil

nstitution	Year of Passing	Subject	Name of School/College	Name of Board / University
	1967		Goot High School Shilling	Assaul, J. School, Solo
5	1970	Schener?	St- Anthony's Shillip	Ganhati - llinpusiti
TION	Jen/977	Madiew/auyony	Assets Medical College	Dibrugat Vaiureuty
ADUATION	1	1		7
Qualifications	1		1	

DEPONENT 7.11.38

### VERIFICATION

I, the deponent abovenamed, 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.

DEPONENT 7-11-01

The above affidavit is duly sworn before me by the candidate/deponent

Place: Champhai

Date : \_\_\_\_7-11-08-

Magistrate 1stl Class

Magistrate 1º Class Champhai District Champhai