

III SCHEDULE

[Sec. Rule 18(1)]

Return of Assets and Liabilities for the year  
as on 31<sup>st</sup> December, 2010

Name of the Government servant in  
English in block letters)

श्री. राजेश-नाथ पन्ना

2. Service to which belongs

पञ्चवरी

3. Total length of service up to date

28 वर्ष

(i) in Non-gazetted rank

(ii) in Gazetted rank

4. Present Post held and place of posting

पञ्चवरी पञ्चायत समिति

5. Total annual income from all sources during the  
Calendar Year immediately preceding the 1<sup>st</sup>  
January,.....

25000/-

6. Declaration:-

I hereby declare that the return enclosed namely, Forms I to V are complete, true and correct as  
on..... to the best of my knowledge and belief, in respect of information due to be furnished by me  
under the provisions of sub-rule(1) of Rule 18 of the Central Services(Conduct) Rules, 1964.

Date.....

Signature.....

Ganesh



FORM No. II

Statement of liquid assets as on the 31<sup>st</sup> December 2000

(1) Cash and Bank balances exceeding 3 months emoluments.

(2) Deposits, loans advances and investments (Such as shares, securities, debentures, etc.)

Sr.No.	Description	Name and Address of Company, Bank, etc.	Amount	If not in own name, name and address of person in whose name held and his/her relationship with the Government servant.	Annual income derived	Remarks
1	2	3	4	5	6	7
1	C. खाता एच 11538674597	एच एच एच	2,000/-	—	—	—

Date.....

Signature.....



FORM No III

Statement of movable property as on the 31<sup>st</sup> December, 2000

Sl. No.	Description of items	Price of value at the time of acquisition and/or the total payments made up to the date of return as the case may be /in case of articles purchased on hire purchase of instalments basis	If not in own name, name and address of the person whose name and his/her relationship with the Government Servant	How acquired with approximate date of acquisition	Remarks
1	2	3	4	5	6
-	-	-	-	-	-

Date.....


Signature..

*Anant*

FORM No.IV

Statement of Provident Fund and Life Insurance Policy as on 31<sup>st</sup> December, 2009

Insurance Policy		Provident Fund				Remarks (if there is dispute regarding closing balance, the figures according to the Government servant should also be mentioned in this column)			
Sl No	Policy No. and date of Policy	Name of Insurance Company	Sum insured/date of maturity	Amount of annual premium	Type of Provident Funds/GPF/CPF Account No.		Closing balance as last reported by the Audit/Accounts Officer along with date of such balance	Contribution made subsequently	Total
1	2	3	4	5	6	7	8	9	10
						10/12/2008-10 10/12/2008-10 10/12/2008-10			

Signature: 

Date: .....

FORM No.V

Statement Debts and other Liabilities as on 31<sup>st</sup> December, 2000

Sr.No.	Amount	Name address Creditor	and of Date incurring Liability	of Details Transaction	of Remarks
1	2	3	4	5	6
-	-	-	-	-	-

Date.....

Signature

