

THE SCHEDULE  
[See Rule 18(1)]

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

2010-11

1. Name of the Government servant in  
(Full in block letters) **VINOD KUMAR**

2. Service to which belongs **PATWARI**

3. Total length of service up to date: **19 years 4 months**  
(i) in Non-gazetted rank **in Non-gazetted rank**  
(ii) in Gazetted rank

4. Present Post held and place of posting **PATWARI, P. CDHARM PUR.**

5. Total annual income from all sources during the  
Calendar Year immediately preceding the 1<sup>st</sup>  
January. **2010 TO 31-12-2010**

Gross Salary	=	241872 -
Aggregate	=	50000 -
		<hr/>
		291872

6. Declaration:-

I hereby declare that the return enclosed namely, Forms I to V are complete, true and correct as on **31-12-10** 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 **5-8-11**

Signature **Vinod**

FORM No.1

Statement of immovable property as on 31<sup>st</sup> December 2010 (e.g. Lands, House, Shops, Other Buildings, etc.)

Sl No.	Description of property	Precise location (Name of District, Division, Taluk and Village in which the property is situated and its distinctive number, etc.)	Area of land (in case of land and buildings)	Nature of land in case of landed property	Extent of interest	If not in own name, state in whose name held and his/her relationship, if any to the Government servant	Date of acquisition	How acquired (Whether by purchase, mortgage, lease, inheritance, gift or otherwise) and name with details of person/persons from whom acquired (addresses and connection of the Government servant, if any, with the person/persons concerned) please see note 1 below	Value of the property (see Note 2 below)	Particulars of sanction of prescribed authority, if any	Total Annual income from the property	
1	2	3	4	5	6	7	8	9	10	11	12	13
1.	Land	Vill. Anjibrahanna Teh. & Distt Solan		17-2, Cultivated Rights of Non- Cultivated	Full	Self	-	Parental	69,00,000	Approx 50,000/- Approx		
2.	Land	Vill. Badhwani Teh. & Distt Solan		0-5 0-3 House Bishun 0-2 vacant	"	Self	-	band only By family settled men By mother	13,00,000/-	Approx		

DATE 5-8-11

Signature 

FORM No. II

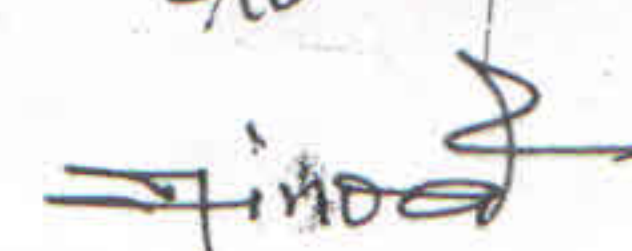
Statement of liquid assets as on the 31<sup>st</sup> December 2007

(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.	Saving Account A/c 2136	U. L. O Bank Kumarratti	Nil	-	Self	
2.	R. D/A 18101	Post office Kumarratti	5800/-	-	& Agriculture income	
2.	R. D/A 19020	do	7000/-	-	do	
4.	Saving Account A/c 65-019559680	State Bank of Patiala	12398/-	-	do	
					do	
					do	
					do	

Date: 5-8-11

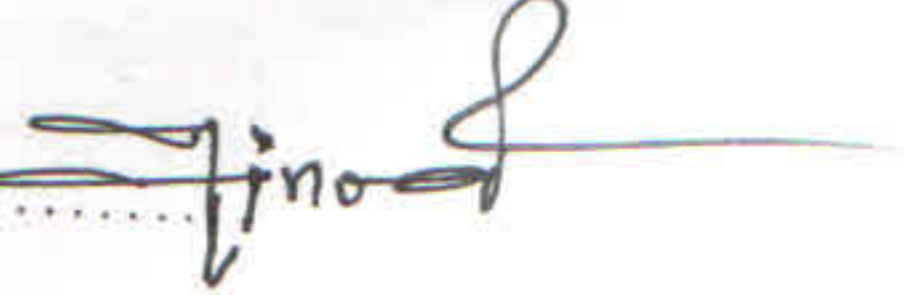
Signature: 

FORM No. III

Statement of movable property as on the 31<sup>st</sup> December, 2010

Sr. 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	Gold - 70gram Silver 50g Marzular other item Householdings	140,000/- 7000/- 100000/- 100000/-	APROX. APROX APROX APROX	5 6 Cifted by Parents & Father in law at the time of marriage was By self income & loan Cifted by Parents & Father in law at the time of marriage & some self income	

Date. 5-8-11

Signature. 

FORM No.IV

Statement of Provident Fund and Life Insurance Policy as on 31<sup>st</sup> December, 2010

Sl. No.	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)
	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	L.I.C. 150005172	L.I.C.	15-8-14	1847-80	G.P.F.H. H.L.R. 6463	65296- 3 on 30/4/11	27000	192296	—

Date: 5-8-11

Signature: *[Handwritten Signature]*

FORM No. V

Statement Debts and other Liabilities as on 31<sup>st</sup> December, 2009

Sr.No.	Amount	Name address and of Creditor	Date incurring Liability	Details of Transaction	Remarks
1	160,000/-	Jagindra Bank Dharmpur	2003	Being paid	
2.	300000/-	U.C.O Bank Kamastutti	2008	Monthly instalment	
3	200000/-	K.C.L Limit U.L.O Bank Kamastutti	do	do	
				do	

Date 5-8-11

Signature 