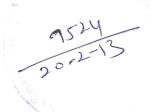


I. Reason for Declaration (tick)

- i) Appointment
- ii) Annual declaration
- iii) Vacation of office
- iv) Any other reason



II. Details of declarant

Name	ID Card No.	Place of Birth	Date of Birth	Marital Status	Contact Address (Phone, e-
De Shivan Troken		Hamilpur	24-10-1985		9418488311
					Shiv Thakus y @ grail Can

III. Details of spouse(s)

Name	ID Card No.	Place of Birth	Birth	Contact Address (Phone, e-mail)	If employed, name of the organization
De RavinderThoku	1	Mandi	22-06-1981	guido-28786 Ravinder makusu	Health and
				@ grail. Con	Family welfare

IV. Details of dependants

Name	ID Card No.	Relationship	Date of Birth	Contact Address (Phone, e-mail)	If employed, nam of the organizatio
					3
		- Nel -			

Part B - Declaration of income, assets and liabilities

If you or your spouse(s) or your dependants own assets, please provide details under the relevant sections of Tables 1-7 given below:

Table 1: Immovable property

Name of the	Type of Plot or		Location	Estimated	Acquisition	
registered owner	Property	Thram No.	1	market value	Mode & when acquired	Source of finance, if purchased
			MU			

Table 2: Shares and stocks

Name of the	Certificate	No. of	Name of	Estimated	Acquis	si tio n
registered owner	Number	Shares / stocks	company or business	market value	Mode & when acquired	Source of finance, if purchased
						purchaseu
			· Mul			
			An an annual section of the section			

Table 3: Vehicle/machineries

Name of the registered	Type of vehicle/	Model & year of	Registration No.	Estimated value	Acquis	uisition
owner	machineries manufactur	manufacture			Mode & when acquired	Source of finance, if purchased
		4	0			
		_ \	X			
	profession					

Table 4: Interest bearing deposits

Name of the owner	Types of deposits	Account No.	Bank/Financial Institutions/ Companies	Amount	Mode of acquisition
De Shivan Thekul	PPF	26223	Post office	156,000	
	LIC	15388565	3 _ 21	692 yes	uly.
	saving Mr.	55 126593	of SBP-Bilonger	1 200	000/-

Table 5: Convertible assets such as the works of art, jewellery, gold, and other objects of value, exceeding a total value of Nu.100,000/=

Name of the owner	Description of the item	Estimated value	Acquisition		
		*	Mode & when acquired .	Source of finance, if purchased	
Es Shivani	crold	6 lakh	Massiere	2 ault.	
Trokey	Tonellry		. 0	90	
	U				

Name of the registered owner	Type of activity	Estimated value	Acquisition		
		_	Mode & when acquired	Source of finance, if purchased	
		- Nel	***************************************		

Table 7: Other assets and activities not specified (if any)

Name of the	Types of	Estimated	Acq	uisition	Remarks if
owner	assets/activities	Value	Mode & when acquired	Source of finance, if purchased	any
		Nel			
	:				

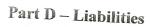
Note:

- 1. Immovable property means land, building, and house.
- 2. Name of the registered owner/owner means the declarant, declarant's spouse(s) or dependants.
- 3. Dependant means an individual including children entirely dependent on earnings of the declarant.
- 4. Mode of acquisition means how the assets were acquired i.e purchased, inherited, gifted, etc.

Part C - Income statement

Please indicate your gross income from the following sources for the year previous one year

Types of Income	Declarant	Spouse	(s)		Dependant	ts	Total
		1	2	1	2	3	
Income from employment	2,61,510	3,60,000			,		6,21510
Income from consultancy							1
Rental income from land & building							1
Interest income from deposits & securities			· 45				
Income from shareholdings							
Income from hire of vehicles/ machineries or any other property except land & building.							
Any other incomes not specified above							COA POPERATION CONTRACTOR OF THE PARTY OF TH
Grand Total	26'516	3,60000					1 91-1



Loans, mortgages, etc.

Name of Debtor	Creditor (Name of	9		
	Financial Institution)	Loan Amount	- Octal	Remarks if any
	(1)		Outstanding	
	- Mil			
				1

Expenditure on childrens' education

Name of child	Name of Institute, place	~		
	factor, place	Course	Annual	Remarks if any
	- 11:0		Expenditure	11 telly
Q	PCC			

ite if one				
its if any not co	vered above, please	· specify		
	7	specify		
even i.				
	nts if any not co		nts if any not covered above, please specify	

Declaration:

I hereby declare that the information given in this Form is true and correct to the best of my knowledge. In case any information is found incorrect, I assume full responsibility thereof and shall be liable for prosecution as per the Anti-Corruption Act, Section 128.

Chilan		
(Dr. Shivani Thekus)		
(Name and signature of the Declarant)	Date:	16-2-13
Countersigned by spouse(s)		
De Raymoler Theker)	•	
1. (Name and signature)		
S	Date:	16-2-12
2. (Name and signature)		
	Date	