

Pass. vijay
 16-2-13

(1)

Part A – General information

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-mail)
Dr. Sushel Sharma	0009739 Licence No.	NERI Distt. Hamirpur (H.P.)	20.02.1980	Married	Vet. officer JLG Veterinary Hospital BERTHUN Distt. Bilaspur PH-9412475631

III. Details of spouse(s)

Name	ID Card No.	Place of Birth	Date of Birth	Contact Address (Phone, e-mail)	If employed, name of the organization
Dr. Shashi Sharma	AKGFPRO78559 PAN No.	Adhwaui Distt. Rangra (H.P.)	14/12/81	94184-78412	Asst. Husbandry Deptt.

IV. Details of dependants

Name	ID Card No.	Relationship	Date of Birth	Contact Address (Phone, e-mail)	If employed, name of the organization
Ayush Sharma	-	Son	13.06.2009	-	-

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

Table 2: Shares and stocks

Name of the registered owner	Certificate Number	No. of Shares / stocks	Name of company or business	Estimated market value	Acquisition	
					Mode & when acquired	Source of finance, if purchased
			NIL			

Table 3: Vehicle/machineries

Name of the registered owner	Type of vehicle/ machineries	Model & year of manufacture	Registration No.	Estimated value	Acquisition	
					Mode & when acquired	Source of finance, if purchased
Dr. Sushheel Sharma	CAR	i-10 2010	HP 21A- 5227	338175		CASH and K.C.C.
←do→	Motorcycle	Discover-35 2007	HP-21A 2516	35,000		Bank Bani CASH

Table 4: Interest bearing deposits

Name of the owner	Types of deposits	Account No.	Bank/Financial Institutions/ Companies	Amount	Mode of acquisition
Dr. Sushheel Sharma	F.D.	32798467912	S.B.I	25000/-	
←do→	P.P.F.	31629131655	S.B.I	63000/-	
Ayush Sharma	LIC	154252751	LIC	17100/-	
Dr. Sushheel Sharma	LIC	Policy No. 1510934613	LIC	6506/-	

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
		NIL		

Table 6: Commercial activities and other property rights

Name of the registered owner	Type of activity	Estimated value	Acquisition	
			Mode & when acquired	Source of finance, if purchased
		NIL		

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

Name of the owner	Types of assets/activities	Estimated Value	Acquisition		Remarks if any
			Mode & when acquired	Source of finance, if purchased	
		NIL			

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)		Dependants			Total
		1	2	1	2	3	
Income from employment	≈ 388000	≈ 379000	—	—	—	—	7,67000
Income from consultancy	—	—	—	—	—	—	—
Rental income from land & building	—	—	—	—	—	—	—
Interest income from deposits & securities	—	—	—	—	—	—	—
Income from shareholdings	—	—	—	—	—	—	—
Income from hire of vehicles/ machineries or any other property except land & building.	—	—	—	—	—	—	—
Any other incomes not specified above	—	—	—	—	—	—	—
Grand Total	≈ 388000	≈ 379000	—	—	—	—	767000

Part D – Liabilities

Loans, mortgages, etc.

Name of Debtor	Creditor (Name of Financial Institution)	Loan Amount	Loan Outstanding	Remarks if any
	NIL			

Expenditure on childrens' education


Name of child	Name of Institute, place	Course	Annual Expenditure	Remarks if any
	NIL			

Other investments if any not covered above, please specify

N.A.

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.

Dr. Susheel Sharma 

(Name and signature of the Declarant)

Date: 13/02/2013

Countersigned by spouse(s)

Dr. Shashi Sharma 

1. (Name and signature)

Date: 13/02/2013

2. (Name and signature)

Date