

CSH
14/2/13

THE SCHEDULE


(See Rule 18 (1) Return of Assets and Liabilities on first Appointment/as on the 31st December, 2012)

Name of the Govt. Servant in full (in Block letters).	Service to which he belongs.	Total length of service up to date.	In Non Gazetted rank	In Gazetted Rank	Present Post held and place of posting.	Total Annual Income from all sources during the calendar year immediately preceding the 1 st date of January, 2013
1	2	3	3(1)	3(11)	4	5
DR. SWADESH KUMAR CHAUDHARY	JR PAN & VS-I	28 years 7 months 3 days	- MAL -	28 yrs 7 months 3 days	ASSISTANT DIRECTOR (EXTENSION) 25-May, 2010	₹ 2225297/-

DECLARATION

I hereby declare that the return enclosed namely Forms I to V are completely true and correct as on 01-01-2013 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) Rule 18 of the Central Civil Service (Conduct) Rules, 1964.

Date: 31.01.2013

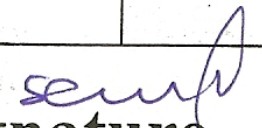
Signature. 

(Dr. S.K. Chaudhary)
A.D (Extension) o/o
SD AH/B CAG (HP)

FORM - I

Statement of immovable property on first appointment/ as on 31st December, 2012.

Serial No	Description of Property	Precise location (Name of Distt. Sub-Div. Taluka and Vill. in which property is situated. and also its distinctive number, etc	Area of land (in case of land & building)	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 Govt. servant.	Date of acquisition	How acquired? (Whether by purchases, lease, mortgage, inheritance, gift or otherwise) and name with details of person/persons from whom acquired (address and connection of the Govt Servant, if any, with the person/persons concerned	Value of Property	Particulars of sanction of prescribed authority, if any	Total annual income from the property	Remarks
1	2	3	4	5	6	7	8	9	10	11	12	13
1.	Ancestral property consisting of old residential house & cattle shed.	V. Chandri Tal. Anub Distt. Una (HP)	Approx. 4 kanals	—	—	Sh. Birkhandan Father	—	—	30 aas.	—	—	—
2.	Land	— do —	20 kanals	Agricultural land,	Full	—	2008	As per will of grandmother	40 aas.	—	—	—

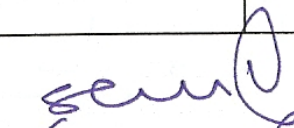

Signature.
 (Dr. S.K. Chaudhary)
 A-D (Ext.) of
 SD An/8 Una (HP)

FORM - II

STATEMENT OF LIQUID ASSETS on first Appointment/ as on the 31st Dec, 2012.

1. Cash and Bank balance exceeding 3 months emoluments. 9.65 Lakhs.
2. Deposits, loans, advances and investment (such as Share, securities, debentures etc.)

Sl. No.	Description.	Name and address of company Bank etc.	Amount.	If not in own name and address of persons in whose name held and his/her relationship with Govt. Servant.	Annual Income derived	Remarks
1	2	3	4	5	6	7
				NIL		

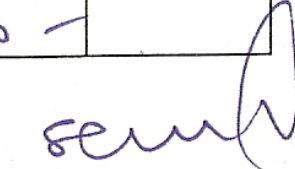

Signature.
 AD (Extension) of
 Dr. A. N. B. (GP)

FORM - III

Statement of movable property on first Appointment/ as on the 31st Dec, 2012.

Sl. No.	Description of Item.	Price or 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 or instalment basis.	If not in own name, give name and address of the person in whose name and his/her relationship with the Govt. servant.	How acquired with approximate date of acquisition.	Remarks
1	2	3	4	5	6
1.	Car i10	4,04,000 -	own	Personal savings	2008
2.	Motor cycle	43,000 -	"	do -	2002
3.	Household items (Furniture, LCD, CTV, computers, books etc.)	4,00,000 -	"	Acquired over a period of time as and when needed out of personal savings.	
4.	24ct Jewellery Gold	180 gm	"	do -	

Signature.


 (Dr. S.K. Chaudhary,
 Asstt. Director (Ent.) of
 AN/B Wp (Hb)

FORM - IV

Statement of Provident fund and life Insurance Policy on ~~first Appointment/~~ as on the 31st Dec, 2012.

Sl. No.	Policy No. & Date of Policy.	Name of Insurance Policy.	Sum insured/ date of maturity.	Amount of annual premium.	Type of provident fund/ GPF/ CPF Account No	Closing balance at last reported by the Audit/Accounts Officer along with date of such balance.	Contribution made subsequently.	Total	Remarks (if there is dispute regarding this, the Govt. servant should also mention in this column.)
1	2	3	4	5	6	7	8	9	10
1	—	—	—	—	G.P.F. Account No HR-04/3543	3016686	463342	3480028=	—

Signature

(D. S. R. Chaudhary
Asst. Director (Ext.)
D. J. AH/B Lm (HB)

FORM - V

STATEMENT OF DEBTS AND OTHER LIABILITIES. on first Appointment/ as on the 31st Dec, 2012.

Sl. No.	Amount (In Rupees).	Name and address	Date of incurring	Details of transactions.	Remarks
1	2	3	4	5	6
			NIL		

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Signature. (Dr. S.K. Chandhary)

AD Extension of, DA AU/B Use (HB)