

Form A
(See Rule 2)

Statement of assets and liabilities filed by
.....(name and designation of the
public servant) for the period to

1. Name :

2. Permanent address with Telephone No.,
if any :

3. Name of the members of the family and
his relationship :

4. Present monthly income :

5. Liabilities :

(a) Nature extent and other
particulars of liability and
the date when it was incurred :

(b) Nature and address of the
person to whom the public
servant is liable :

I, do solemnly declare that the information
furnished above is true and that nothing has been omitted therefrom.

Signature of the Public Man