

STATEMENT OF IMMOVABLE PROPERTY FOR THE YEAR ENDING \_\_\_\_\_

1. Name of Officer (In Block Letters) : DR. K. PRAVEEN CARD 2. Present post held : MEDICAL OFFICER 3. IC.NO. : 2048  
 4. Pay in Pay Band Rs. \_\_\_\_\_ + GP Rs. \_\_\_\_\_ 5. Section : HOSPITAL 6. Unit: GSO.

Name of District, Sub Division Taluk & Village In which property is situated	Name and details of property Housing, Lands and other buildings *	Present Value	If not in own Name, State in whose Name held and his/her relationship to the Government servant	How acquired whether by purchase, lease @ mortgage, inheritance, gift or otherwise, with date of acquisition and name with details of persons from whom acquired	Annual income from the property	Remarks
(1)	(2)	(3)	(4)	(5)	(6)	(7)

- Nil -      - Nil -      - Nil -      - Nil -      - Nil -      - Nil -      - Nil -

\* In applicable clause to be strike out in case where it is not possible to assess the value accurately, the approximate value in relation to present conditions may be indicated

@ Included short-term lease also

Signature : K. Praveen Card

Date : 20/1/12

Note: The declaration form is required to be filled in and submitted by every member of Group A and B Service under Rule 18 (1) (ii) of the Central Civil Services (Conduct) Rules, 1964, on first appointment to the services and thereafter at the interval of every twelve months giving particulars of all immovable property owned, acquired or inherited or held on lease or mortgaged either in his/her own name or in the name of any member of his/her family or in the name of any other person.

To

The Administrative Officer, GSO, Kalpakkam.



*Smt. P. V.  
23/1*