

STATEMENTS OF IMMOVABALE PROPERTY FOR THE YEAR 2019 (CALENDER YEAR)

1. Name	: NAVANEETHA	AM. S	2. IC NO :	50943	3. Grad	e : NURSE/D
4. Group/Sub Group/Division/ Section	: MG/DAE HOSE GYNAECOLOG		5. Service to which the Officer belongs	Group A	6. Date first appoint in DAI	ment
7. Date of first appointment in GSO	: 24/08/1999		8. Present Post held(Design.)		9. Prese Pay(Rs.	
Name, Village, Taluk & District in which property is situated (Please give full postal address) with PIN Code	Name & Details of Property Housing & other land building (Please indicate Flat No/ Plot No./Survey No.) Area in Sq.ft	Value**	If not in own name, state in whose name held & his/her relationship to Govt. Servant	e How acquired whether by purchase/lease (includes short-term lease also) mortgage, inheritance, gift or otherwise with date of acqn. & Name with details of persons from whom acquired	Annual income from the property	Please indicate Ref No. & date of permission obtained
nil	nil	nil	nil	nil	nil	nil

* To be submitted in January in the following year. Signature & Movaner How Date: 09.01.2020 Phone No.84676 / 89263

** In case where it is not possible to assess the value accurately, the approximate value in relation to present conditions may be indicated.



