(17)

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

| Name Group/Sub Group/Division/ Section Date of first appointment in GSO | : ARUN KUMAR T.V : MG/DAE HOSPITAL/ : 26/06/2019 | | | 52263 Group A | 3. Gra6. Date first appoir in DA9. Pres Pay(Re | e of : 26/06/2019 Intment AE Sent : 56100/- |
|---|--|----------------|--|---|--|--|
| Name, Village, Taluk & District in which property is situated (Please give full postal address) with PIN Code | indicate Flat No/ | Value** | If not in own name, state in whose name held & his/her relationship to Govt. Servant | 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 GOVERNMENT OF DEPT. OF ATOMIC WAS |
| nil | nil | nil | nil | nil | nil | nil A |
| * To be submitted in Phone No. <u>84822</u> | January in the followin | ng year. Signa | ature All-V | Date: 6/2/ | <u>Lo</u> | THE TIME OF THE PARKENS AND PA |

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

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