STATEMENTS OF IMMOVABALE PROPERTY FOR THE YEAR 2024 (CALENDER YEAR)

1. Name 4. Group/Sub Group/Division/ SATHYA DEVASENA MG/DAE HOSPITAL/

GYNAECOLOGY

2. IC NO 5. Service to: which the

Officer

belongs

50953 Group A

6. Date of : 29/10/1999

3. Grade · : NURSE/D

first

appointment in DAE

9. Present : 92700/-

Pay(Rs.)

Section

7. Date of first

appointment in

10. Date of Birth:

GSO

29/10/1999

18/05/1966

8. Present Post held(

Design.)

11. Date of: 31/05/2026

Retirement

			Rethement			
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		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
VILLAGE	SURVEY NO 146 /6F & 146/7 F AREA 23.5 CENT	117500/-	OWN NAME	PURCHASED FROM G MURUGESAN PILLAI & PERAMBAKKAN	NIL	NIL

^{*} To be submitted in January in the following year. Signature Satura devacena Date: 61 Phone No.84676

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

