



தமிழ்நாடு தமில்நாடு TAMIL NADU
6267 M. முனையால் போன்று (P.20)
20.4.2009

44AA 470550
G. ஆரையன்,
அதிகாத்தான் விரப்பளவூர்,
கிராமம் குவை தியங்கா,
கிராம: 3/2003. கூரூப்-606 803.

APPENDIX VII-A
[CHAPTER IV, PARA 4.5(3)]
FORM 26
(SEE RULE 4A)

Affidavit to be furnished by the Candidate before the returning officer for election to Lokhsaba
(Name of the House) from Arni (Constituency (Name of the constituency)

I, M.Durairaj Son of M.Manickam aged about 50 Years, resident of Murugapadi Village & Post, Polur Taluk, Tiruvannamalai District- 606 803. Candidate at the above election, do hereby solemnly affirm/ state on oath as under:-

Cognis

1. I am not accused of any offence(s) punishable with imprisonment for two years or more in a pending case(s) in which a charge(s) has/have been framed by the court(s) of competent jurisdiction.

If the deponent is accused of any such offence(s) he shall furnish the following information:-

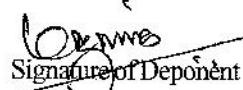
- (i) Case/First information report No./Nos. -No Cases-
- (ii) Police Station(s)..... District(s).....
State(s).....
- (iii) Section(s) of the concerned Act(s) and short description of the offence(s) for which the candidate has been charged.....
- (iv) Court(s) which framed the charges(s)
- (v) Date(s) on which the Charge(s).....
- (vi) Whether all or any of the proceeding(s) have been stayed by any court(s) of competent jurisdiction.....
2. I have been/have not been convicted of an offence(s) other than any offence(s) referred to in sub-section(1) or sub-section(2), or covered in sub-section(3), of section 8 of the representation of the People Act, 1951(43 of 1951) and sentenced to imprisonment for one year or more,

If the deponent is convicted and punished as aforesaid, he shall furnish the following information:

- (i) Case/First information report No./Nos NIL
- (ii) Court(s) which punished.....
- (iii) Police Station(s)..... District(s).....
State(s).....
- (iv) Section(s) of the Concerned Act(s) and short description of the offence(s) for which the candidate has been charged.....
- (v) Date(s) on which the sentence(s) was/Were pronounced.....
- (vi) Whether the sentence(s) has/have been stayed by any court(s) of competent jurisdiction
-

Place: Polur

Date: 20.04.2009


Signature of Deponent

VERIFICATION

I, the above-named deponent, do hereby verify and declare that the contents of this affidavit are true and correct to the best of my knowledge and belief, no part of it is false and nothing material has been concealed therein.

Verified at, Polur this 20th day of April -2009


Signature of deponent

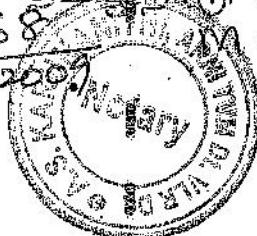
Note: "The columns in this form which are not applicable to the deponent may be struck off"



கமிட்டாடு தமில்நாடு TAMIL NADU
b268 அனைத்து பூர்வான் பிரதோஷம்

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க. ஆனாட்சி.

அந்தெந்தான் பிரதோஷமான்,
நோக்கம் ஏனோ கதியங்கள்,
நாள்: 3/2009. பேரவை: 606 803.

ANNEXURE-I

Affidavit to be furnished by candidate alongwith nomination paper

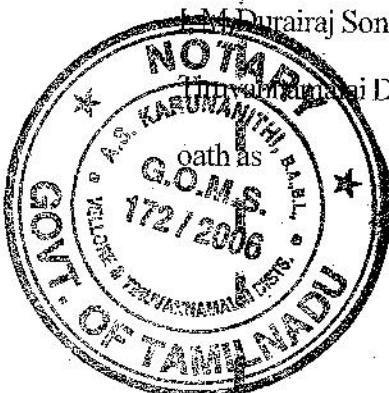
Before the Returning Officer

For Election to Lokhsaba (Name of the House) From Arni Constituency

(Name of the Constituency)

I M.Durairaj Son of M.Manickam aged 50 Years, resident of Murugapadi Village & Post, Polut Taluk,

Thirumayamai District- 606 803 Candidate at the above election, do hereby solemnly affirm and state on
Signed before me at Arni, Tvm.Dt.



20 APR 2009
A.S. KARUNAMITHI, B.A.B.L.
Advocate & Notary Public
ARNI - 632 301, TVM.DT., T.N.

Original

under:-

(Strike out whichever not applicable)

1. The following case(s) is/are pending against me in which cognizance has been taken by the court -No Case-

(i) Selection of the Act and description of the offence for which Cognizance taken

(ii) The Court which has taken Cognizance :

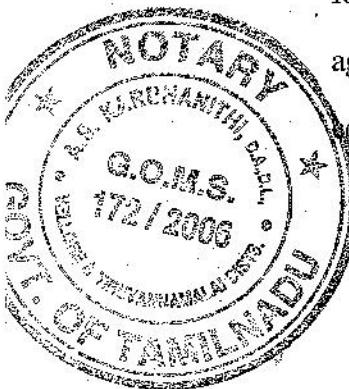
(iii) Case No

(iv) Date of order of the Court taking Cognizance

(v) Details of appeal(s)/application(s) for revision, etc., if any, filed against above order taking

Cognizance before me at ARNI, Tvm.Dt.

20 APR 2009
S. S. KARUNANITHI, B.A.B.L.
Advocate & Notary Public
ARNI - 632 301, TVM.DT., T.M.



| | | |
|---------|---|-----|
| (b) (i) | Income Tax including surcharge [Also indicate the assessment year upto which Income Tax Return filed. Give also Permanent Account Number (PAN)] | NIL |
| (ii) | Wealth Tax [Also indicate the assessment year upto which Wealth Tax return filed.] | NIL |
| (iii) | Sales Tax [Only in case of proprietary business] | NIL |



Signed before me at ARMI, Tvm.Dt.

G.S. KARUNAGNIT, B.A.B.L.
Advocate & Notary Public
ARMI - 632 301, TVM.Dt., T.N.
20 APR 2009

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| | | | |
|------|--------------|-----|--|
| (iv) | Property Tax | | |
| | | NIL | |

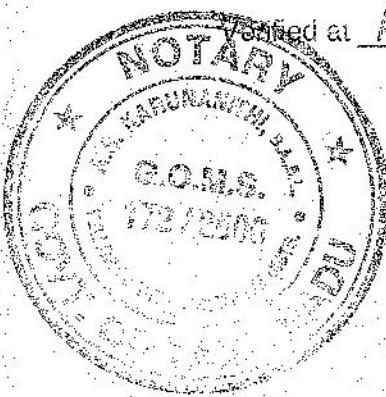
(4) My educational qualifications are as under:-

(GIVE DETAILS OF SCHOOL AND UNIVERSITY EDUCATION)
 1981 B.Sc. (Madras University) MA (Soc) Annamalai University
 (Name of School / University and the year in which the course was completed should also be given)

One IMP
DEONENT

VERIFICATION

I, the deponent abovenamed, do hereby verify and declare that the contents of this affidavit are true and correct to the best of my knowledge and belief; no part of it is false and nothing material has been concealed therefrom.



Signed before me at ARNI, TVM.Dt.

Ummma

20 APR 2009
 A.S. KARUNANITHI, B.A.B.L.
 Advocate & Notary Public
 ARNI - 632 301, TVM.Dt., TN.

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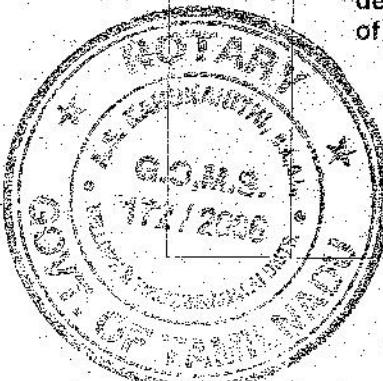
- (3) I give herein below the details of my liabilities / overdues to public financial institutions and government dues.

[Note: Please give separate details for each item]

| S.No. | Description | Name and address of Department | Amount outstanding as on |
|---------|---|--------------------------------|--------------------------------|
| (a) (i) | Loans from Banks | | |
| | NIL | NIL | |
| (ii) | Loans from financial institutions | | |
| | | NIL | |
| (iii) | Government dues :- | | |
| | (a) dues to departments dealing with Government accommodation | NIL | |
| | (b) dues to departments dealing with supply of water | NIL | |

Signed before me at ARV, Tvm.Dt.

G.S. KARUNANITHI, B.A., LL.B.
Advocate & Notary Public
ARV - 632 301, TVM.DL, T.N.



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| | | | |
|--|---|-----|--|
| | (c) dues to departments dealing with supply of electricity | | |
| | | NIL | |
| | (d) dues to departments dealing with telephones | | |
| | | NIL | |
| | (e) dues to departments dealing with Government transport (including aircrafts and helicopters) | | |
| | | NIL | |
| | (f) Other dues, if any | | |
| | | NIL | |



Signature before 20 APR 2009, T.V.M.Dt.

20 APR 2009
A.S. KARUNAMITHI, B.A.B.L.
Advocate & Notary Public
ARM - 632 301, T.V.M.Dt., T.N.

[Handwritten signature over the stamp]

(2) That I give herein below the details of the assets (immovable, movable, bank balance, etc.) of myself, my spouse and dependents: *

A. Details of movable assets.

(Assets in joint name indicating the extent of joint ownership will also have to be given)

| S. No. | Description | Self | Spouse(s) Name(s) | Dependent-1 Name: | Dependent-2 Name: | Dependent-3, etc. Name: |
|--------|---|----------------------------|-------------------|-------------------|-------------------|-------------------------|
| (i) | Cash | 1,00,000/- | — | — | — | — |
| (ii) | Deposits in Banks, Financial Institutions and Non-Banking Financial Companies | — | — | — | — | — |
| (iii) | Bonds, Debentures and Shares in companies | — | — | — | — | — |
| (iv) | Other Financial instruments NSS, Postal Savings, LIC, Policies, etc. | — | — | — | — | — |
| (v) | Motor Vehicles (details of make, etc.) | TVK 740 TVS SUZUKI | — | — | — | — |
| (vi) | Jewellery (give details of weight and value) | 80 gms Gold 85,000/- | — | — | — | — |
| | Other assets, such as values of claims / interests | — | — | — | — | — |

172 Note: Value of Bonds / Shares / Debentures as per the latest market value in Stock Exchange in respect of listed companies and as per books in the case of non-listed companies should be given.

Dependant here means a person substantially dependent on the income of the candidate.

Significant Assets ARNI, T.V.M.Dt.

*G.S. KARUNANITHI, B.A.B.L.
Advocate & Notary Public
ARNI - 632 301, T.V.M.Dt., T.N.*

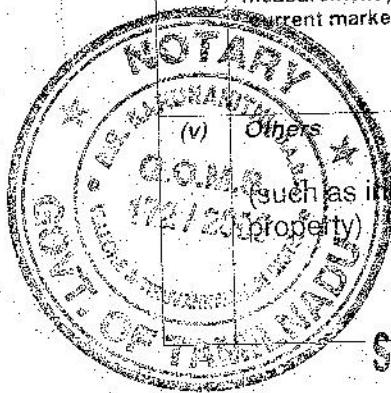
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B. Details of Immovable assets

[Note: Properties in joint ownership indicating the extent of joint ownership will also have to be indicated]

| S. No. | Description | Self | Spouse(s) Name(s) | Dependent-1 Name: | Dependent-2 Name: | Dependent-3, etc. Name: |
|--------|--|--|-------------------|-------------------|-------------------|-------------------------|
| (i) | Agricultural Land -Location (s) -Survey number (s) -Extent (Total measurement) -current market value | NO land | - | - | - | - |
| (ii) | Non-Agricultural Land -Location (s) -Survey number (s) -Extent (Total measurement) -current market value | NO non Agri- cultural Land | - | - | - | - |
| (iii) | Buildings (commercial and residential) -Location (s) -Survey number (s) -Extent (Total measurement) -current market value | NIL | - | - | - | - |
| (iv) | Houses / Apartments, etc. -Location (s) -Survey number (s) -Extent (Total measurement) -current market value | NIL | - | - | - | - |
| (v) | Others (such as interest in property) | NIL | - | - | - | - |



Signed before me at ARNI, T.V.M.Dt.

20 APR 2009

A.S. KARUNANITHI, B.A.B.L.
Advocate & Notary Public
ARNI - 632 301, T.V.M.Dt., T.N.

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