

Status of Assets and Liabilities Statement

PROFORMA

For the Period ending : _____
Name of Officer (in full) : _____
Present Post held : _____

Present pay and allowances per month :
Basic Pay : Rs. _____
Allowances (details per month) :
Dearness Allowance : Rs. _____
Dearness Pay : Rs. _____
House Rent Allowance : Rs. _____
Medical Allowance : Rs. _____
Compensatory Allowance : Rs. _____
Interim Relief : Rs. _____
Special Pay : Rs. _____
Gross Pay : **Rs.** _____

(A) IMMOVABLE PROPERTIES

1. Land

Sl. No.	Precise Location	Area of Land	Nature of Land	Extent of interest	Value	In whose name the asset is	Date and manner of acquisition	Remarks
(1)	(2)	(3)	(4)	(5)	(6)	(7)	(8)	(9)

Signature:

2.SHouse

Sl. No.	Precise Location	Extent of interest	Value	In whose name the asset is	Date and manner of acquisition	Remarks
(1)	(2)	(3)	(4)	(5)	(6)	(7)

3. Immovable properties of other description, including mortgage and such other rights

Sl. No.	Precise Location	Extent of interest	Value	In whose name the asset is	Date and manner of acquisition	Remarks
(1)	(2)	(3)	(4)	(5)	(6)	(7)

Signature:

(B) MOVABLE PROPERTIES**1. Cash, Bank Balance, Credit, Insurance Policies**

Sl. No.	Description of Items	Value	In whose name the asset is	Date and manner of acquisition	Remarks
(1)	(2)	(3)	(4)	(5)	(6)

2. Other movable properties:

(every transaction in respect of National Savings Certificates or such things, shares, jewellery, motor vehicles, motor cycle, scooter, refrigerator, colour TV, air conditioner, etc., if the value of such properties exceeds Rs 10,000/- in case of Government servant holding any Class-I post or Rs 5,000/- in the case of government servant holding any Class-III or Class-IV post)

Sl. No.	Description of Items	Value	In whose name the asset is	Date and manner of acquisition	Remarks
(1)	(2)	(3)	(4)	(5)	(6)

Signature:

(C) EXPENDITURE

1. NPS / GPF Account No. : _____

Monthly Contribution: Rs. _____

2. Insurance Policy:

Annual Premium Paid: Rs. _____

Policy No./Nos. _____

3. Number of dependents in course of education with monthly expenditure thereon:

Number of dependent/s: _____ & Monthly expenditure: Rs. _____

4. Monthly Cost on maintaining family: _____

I hereby declare that the declaration made above is complete, true and correct to the best of my knowledge and belief.

Date: _____

(Signature)

Place: _____

(Name in full)