RETURNS OF ASSESTS AND LIABILITIES ON FIRST APPOINTMENT ON THE 10.6.2 or .

1.	Name of the Government Servant in full (in block letters)	NARESH KUMBR
2.	Service to which he belongs	. Himaihal Judicial Servic
3.	Total length of service up to date	
	i) in Non-gazetted rank	M. A
į	li) in Gazetted rank	H.H.
4.	Present Post held and place of Posting	N.A.
5•	Total annual income from all sources during the Calendar year immediately preceding the <u>Tet Jan 2008</u> .	Pp. 26,000 algers
6•	Declaration :	
	I hereby declare that the retur	rn enclosed namely,
	I to V are complete, true and correst	
	e best of my knowledge and belief, in	
	mation due to be furnished by me under	
Sub Ro	ile(I) of Rule 18 of the Central Servi	ices (condict)
Rules,	1964.	

Date 26.7.2002.

FORM NO. I

Date of How acquired (whether by purchase, Value of the Particulars Total Remarks. or otherwise) and name with details (see Note 2 of prescribed income of person/persons from whom acquired below) authority, from the (address and connection of the Government servant, if any, with the person/persons concerned) Please see Note 1 below 8. 9. 10. 11. 12. 13.	Prof Descript No. of prope		Area of land (in case of land and buildings)	Nature of land in case of landed property.	Extent of interest.	If not in own name, State in whose name held and his/her relation if any to the Govern Servant.
Date of How acquired (whether by purchase, Value of the Particulars Total Remarks. acquisition mortgage, lease, inheritance, gift property of sanction Annual or otherwise) and name with details (see Note 2 of prescribed income of person/persons from whom acquired below) authority, from the (address and connection of the if any. property. Government servant, if any, with the person/persons concerned) Please see Note 1 below	1. 2.	3.	4.	5.		
Date of How acquired (whether by purchase, Value of the Particulars Total acquisition mortgage, lease, inheritance, gift property of sanction Annual or otherwise) and name with details (see Note 2 of prescribed income of person/persons from whom acquired below) authority, from the (address and connection of the Government servant, if any, with the person/persons concerned) Please see Note 1 below						
m to de to		mortgage, lease, inheritance, gif or otherwise) and name with de of person/persons from whom acq (address and connection of the Government servant, if any, wit person/persons concerned)	se, Value of t property tails (see Note uired below)	of sanct of presc authorit	ion Annual ribed income from the firm t	ne
					12.	13.

FORM NO. II

MIL

STATE	MENT OF LIQUID	ASSERS ON F	IRST APPOINT	ment as on the	0:6202.		
	· •		_	g 3 months' emoluments. westments (: such as sha	ares, securities,	debentures, etc.)	
S1. No.	Description	Name and Address of Company, Bank etc.	Amount	If not in own name, name and address of person in whose name held and his/her relationship with the Government servant	Annual Income derived	Rem _a rks.	**********
1.	2.	3.	4.	5.	б•	7.	— + + + + +
			* 				

Date 26.7.02.

Signature () 91001

FORM NO.III

STATEMENT OF MOVABLE PROPERTY ON FIRST APPOINTMENT AS ON THE 10.6 2002

Sl. No.	Description of items	Price or value at the time of acquisition and/or the total payments made up to the date of return, as the case may be in case of articles purchased on hire purchase or instalment basis.	If not in own.name, name and address of the person in whose name and his/her relationship with the Government servant.	How acquired with approximate date of acquisition.	Remarks.
	0				
1.	2.	3.	4.	5.	6•
-,-,-	a and a surrence of the article of t				
(D)	TELEVISION	PA 16.500/-	-	Avehorad in the	
(2)	F.V. Trolly 8K	Humand Rx. 6,000 1-18/1900/10.		Purchased in the year, 200 Purchased in the year, 200	·

Date 26-7-007

Signature ...

` .

FORM NO. IV

•		INSURANCE P	DOICIES		
Sl. No.	Policy No. and date of Policy.	Name of Insurance Company	Sum insured/date of maturity	Amount of Annual premium	
1.	2.	3.	4.	5.	

PROVIDENT FUNDS

Type of provident Funds/GPF/CPF Account No.

Closing balance at last reported by the Audit/Accounts Officer alongwith date of such balance.

Contribution made subsequently

Total Remarks (if there is dispute regarding closing balance, the figures according to the Government servant should also be mentioned in this column).

6.

7.

8.

9.

10.

MLL

Date 26.7.2002

Signature (Salam)

FORM NO.Y

	State	Ment of Beb is and o	THER LIABILITIES ON F.	IRST APPOINTMENT AS ON	10.6.2002	
				معان مدن مدن ما و مدن مدن مدن مدن مدن		
S1. No.	Amount	Name and address of Creditor	Date of incurring Liability	D t tails of Transaction	Remarks.	
	· •- •- •- •- •-					
1.	2.	3.	4.	5•	6•	
~ ~~ ~~ ~ *				bm 3 9 in 7m 8m 8m 9m 9m 9m 9m 6m 6m	9 m 9 m 9 m 9 m 9 m 9 m 9 m 9 m 9 m 9 m	g = g = g = g = g = g = g = g = g =

Date 267, 2002

Signature Soldow