	PROPERTY RETURN FORMS FOR CLASS-I & II EMPLOYEES											
	FORM-A											
				Return of as	sets a	and	Liabil	ities and L	Declar	ation		
1	~	Name	of the govt. emp	oyee in full								
	а	(with a	code no.)									
	b	Father	's name									
			which he belongs									
3			th of service upto	date								
			-gazetted rank									
	ii In Gazetted rank											
5 Total annual income from all sources during calendar												
			mediately precee	ding 31 _	3	_ 2	20 10					
6	De	clara										
		_	-			-	-			-	e,true & correct as on	
			31-03-2012		-		-	-			n due to be furnished b	y
			me under the p	provisions of su	b-rule	of Ru	ile 18 0	f the Punjab	Govt. E	mployees	(Conduct) rules 1966.	
								Cianat				
			FILL LIGHT	SHADED CELLS	UNLY			Signat NAME	ure			
	Dat	ed.							nation			
	Dui	eu						Desig	nution			
7	Stri	ke off v	vhich ever not ap	plicable								
	:	This re	turn shall contaiı	n particulars of	all ass	ets &	liabilit	ies of govt.	employe	ee either o	n his/her name or in	
	<i>i</i> the name of any other person.										4	
		lf a go	vt. employee is a	member of HU	F with	co-fo	orecent	ry rights in t	he prop	erty of fan	nily either as KARTA	
	ii	or as a	member,he/she	should indicate	in the	e retu	ırn in Fe	orm 1 the va	lue of h	is/her sha	re in such	J
	"	proprt	y,where it is not p	oossible to indic	ate th	е еха	act valu	e of such sh	are,the	approximo	ate value	
		withe	panatory note sh	ould be added	where	ver n	necessa	ry.				

		YEAF	2									
	STATEME	NT OF IMMO	VABLE	PROPI	ERTY (I	E.G. LAN	VD,HO	USE,SHOPS,O	THER E	<i>SUILDII</i>	VGS ET	°C.)
S.No.	Descriptio n of property	Precise Location(Nam e of Distt.,division, village in which property is situated & its distinctive no. etc.)	Area of land(in case of land/building etc.)	Nature of land (in case of landed property)	Extent of interest	lf not on own name,state in whose name held & his relation with govt. employee	Date of acquisition	How acquired(by purchase,mortgage, lease,inherited,gift otherwise name of person from whom acquired & his relation with govt. employee	Value of property	Particulars of sanction of prescribed authority if any	Total annual income from property	Remarks
1	2	3	4	5	6	7	8	9	10	11	12	13
i												
ii												
iii												
iv	iv											
v												
	NOTE>> IN COLUMN 9, 'LEASE' MEANS AN IMMOVABLE PROPERTY TAKEN FOR A TERM OF MORE THAN ONE YEAR OR RESERVING AT YEARLY RENT, THIS LEASE SHOULD BE SHOWN IN THIS COLUMN IRRESPECT OF ITS TERM & PERIODICITY OF RENT PAYMENT.   NOTE>> IN COLUMN 10, IF PROPERTY ACQUIRED BY PURCHASE, MORTGAGE OF LEASE, THE PRICE OR PREMIUM PAID FOR SUCH ACQUISITION, IF BY LEASE THEN FILL TOTAL ANNUAL RENT BUT IF IT IS BY INHERITANCE/GIFT/EXCHANGE THEN APPROX. VALUE OF PROPERTY.											

Signatures

FORM 2											
		STATEMENT OF LIQU	<b>JID ASSETS</b>		)	/EAR					
1 Cash & bank balance exceeding 3 months emoluments (Pay & allowances) received.											
2 Dep											
S.No.	Description	Name & address of Company,Bank etc.	Amount (Rs.)	8	not in own name,Name address of person in ose name held & his/he relation with Govt. employee	An er inc	nual ome ived	Remarks			
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20											
					Signatures						

FORM 3											
	STATEMENT OF MOVABLE PROPERTY YEAR										
S. No.	Description	Price/Value at the time of acquisition &/or total payment made upto date of acquisition,as the case may be,in case of articles purchased on hire-purchase of instalmemts,basis	If not in own name,Name & address of person in whose name held & his/her relation with Govt.		Approx. date of acquisition		Remarks				
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NOTE	NOTE>> GIVE INFORMATION OF GOLD,SILVER,PRECIOUS STONES,MOTOR CAR,BIKES,REFRIGERATOR,T.V.,A.C.,CLOTHES,UTENSILS,BOOKS,CROCKERY ETC.										
				Signatures							

FORM 4												
		STATEMENT OF DEB	ITS/LIABILITIES			YEAR						
S.No.	Amount	Name & address of creditor	Name of incurring li	ability	Details of tran	saction	Remarks					
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ΝΟΤ	STATEMENT SHOULD ALSO INCLUDE VARIOUS LOANS & ADVANCES AVAILABLE TO GOVT. EMPLOYEE E.G. NOTE>> LOAN FOR CONVEYANCE, HBA ETC. (OTHER THAN ADVANCES OF PAY & T.A.), ADVANCE FROM GPF & LOAN AGAINST LIC POLICIES & F.DS.											
				Cianat								
	Signatures											

	FORM 5										
	STATE	MENT OF LI	E INSURA	NCE POLIC	IES	YEAR					
S. No.	Policy no.& date	Name of insurance company	Sum assured & date of maturity	d & Amount of GPF/PPF a/c no. & of nremium contribution made		Closing balance as last report by audit/accounts officer with date of such balance	Remarks				
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	<u> </u>					Signatures					