Arred Under Notarie

## AFFIDAVIT FORM-XII

ADVOCATES CLERK WELFARE FUND

| JHARKHAN WELFARE FUND  | D P   |  | 54                               | MUNITED A | sA)                            | 19, 24   | 1800   | (S.2)     | 4111111111  |
|--|---|--|----------------------------------|-----------|--------------------------------|--|--|-----------|---|
| Property of Government the sanctioned map will be deemed to be cancelled due to misrepresentation and suppression of facts.  Sworn & Signed this affidavit on thisday of | That Further declare that in future, if it will be found that property mentioned above gair Mazarua Aam Khas, kaisare Hind, District Board or Acquired Land | That the land stated above is tribal land / not a tribal land for tribal land Permission for transfer has been obtained vide case no | District Board or Acquired land. |           | P.S. SIMDEGA name of the place | Measuring area of 10.50 Pole situated at Village/ Mouza KHI JR I | Word no of the name of authority SIMDEGA NAGAR PANCHAYAT | Khewat no | L. I nat I am owner / power of attorney holder of land having R.S./M.S. Plot no |



Identified by (name of Identifier): Sign and Seal of Advocate: Name of Advocate:

Name of Place:



Authorized Signatory (Name of Deponent)

0

id suffication of Lawyer Signature Attested QII.