### STATEMENT OF TRUTH (UNDERTAKING)

	1	MALLICK		(full
name)Son/Daughter/Wife	of	ASHOR	KUMAR MAZICAL	(full
name),the undersigned, he	reby	declare:		

- That the information contained in the documents submitted by me to MDRAFM stand true to the original documents. I undertake to provide documentary evidence as and when required.
- 2) That I am aware that the lack of veracity of the information or distortion of the facts and documents will entail the invalidity of the merits affected and that I may be liable for legal responsibility/my joining in this service may be liable for cancellation.

I declare that the foregoing facts are true and correct to the best of my knowledge and belief.

Houtosh Manica Signature

Date- 11-01-2023

Place- BROR

૭ 5 200. (from sepan Filmess Certificate. (Issued by Medical Boar, 5 Passport size photograph 5 HRMS ID(if Any) A PRAN NO(II AMY) (on the form provided to you) Declaration Bank Accounts Passbook from (Photocopy of Passbook) vage | Cancelled Cheque Signatul

## DECLARATION

Son/Daughter/Wife of... HOMBR.... MALLICK... declare that the following facts are true and correct to the best of knowledge and belief for the purpose of recording in ..OFS ASUTOSH MALLICK Service Book.

m Ę

> SHOPUR .Present Address of correspondence:-KUMBHUKA D19T-PIN- 755027 KANTIA, POL BINOHARANK, Н

Permanent Address:-7

2

Mark of Identification:-3 UPPER RIGHT MOTE ON BLACK =

2 Height:-4.

Bhubaneswan Place :- 01-2028 \_ Date :-

Asutosh Wanda Signature

# NON-EMPLOYMENT CERTIFICATE

A The second state of the second seco	Autonomous Body or Society of Central or State Government or Union	/ Corporation / Company / Corporation /	lame) declare that I have not been serving in any capacity either in a	ame)Son/Daughter/Wife of hghok Kumpp MALLICK (full	ABUTOOM MAILICHA
--	--	---	--	--	------------------

Acutosh Manilar Signature

in commercial activities.

Date- 11-01-2028

Place- 885P

# OFS (P) 2020 Batch

Roll No.

MALLICK Name of the Probationers (In Capital letter) : ものしての4

MALLICK ASPOUL KUMAR MALLICK LATE RAJALAXME MAL Name of the Father & Mother:

13 07/1988

DOB

**Present Address** 

AT-KANTIA, PO-KUMBHUKA, DIGT-OFFORD PIN-755027 JAUPUR. **Home District** 

-ap-**Permanent Address** 

MARKIED Marital Status

30 Category

B GC.

Past Experience

Educational Qualification

80 NO MO 4 6 5 8 C Sports Area of Interest PAN

8194 8118 toba

Aadhar No.

7978055786 Mobile / Whatsapp No. agutoshimanik 88 @ gimalir com Mail ID

#### FORM O.G.F.R. – 2 (See Rule – 63)

Ma (M)	e Director, dhusudan Das Regional Academy of Financial Management DRAFM), ubaneswar
Sir, have this da	In pursuance of Order No. 158 F.FD, dated 08 01 2023 I/We ay 11-01-2025 in the forenoon/afternoon relinquished/ made over and
In the	assumed charge of the OFG-I
	Yours faithfully, Agutosh Maria
Place : Date :	Signature of Relieving Officer
	Signature of Relieved Officer
I, (̈R Words)	taking over charge of Government money.  delieving Officer) acknowledge to have received Rs (In Rupees
-	(In Words) Rupees
advances/cas	(In Words) Rupees of other cash and the full amount of such the such the form and to be accounted for by me.
Place :	Signature
Date:	(Relieving Officer) Additional Information to be furnished regarding leave etc.
	elieved Officer
1.	If proceeding on leave -  (a) Address during leave -

5:23 PM **目 G** ■ ···









(SUB-COLLECTOR, SUB-DIVISION, BALASORE)

Name, Designation and DOJ of the Incumbent: ASUTOSH MALLICK, ASSISTANT COLLECTOR, 01-DEC-2008

Current Basic: 44900 205332 TV No: SL Allowances Amount H.R.A. 1390

GPF/PRAN Ac No: 110051209059

For the month of: CELL 1 OF LEVEL 10 No of days worked: Pay of the Month: TV Date: SL Deductions

44900 31-DEC-2022

DECEMBER-2022 Bank:

Bill No: Bill Date: SL Pvt Deductions 1021

STATE BANK OF INDIA 20153099404 131 26-DEC-2022 Amount

Total Allowance

1 LIC PREMIUM (583649206) 2 P. TAX 3 CPF 6017 16656.0 Total Deduction 7238.0 Private Deduction

0.0 NET AMOUNT RUPEES FIFTY FOUR THOUSAND THREE HUNDRED EIGHTEEN ONLY

Signature of D.D.O.

Date:







