STATEMENT OF IMMOVABLE PROPERTY FOR THE CALENDER YEAR ENDING, 2023

1. Name of the Officer (In full):- Dr. Nilutpal Kakati

2. Cadre & Batch

- 3. Service to which the Officer belongs:- Dist. A. H. & Veterinary Officer, Morigaon
- 4. Present Pay:- Rs. 79,540.00

2. Cash Bank Balance, Credit and other movable:-

SI.	Name & Details of the	Cost of	Present Value	If not own name	How acquired, whether by	Annual income
No.	Property Housing,	construction/Acqui		state in whose	purchase, ** mortgage,	from property
	Lands and Building	rement (and year		name held & his	inheritance with date of	
		when purchased)		her relationship	acquisition & name with	
		including of land in		to the Govt.	details of person (S) from	
		case of house		Servant	whom acquired	
1	2	3	4	5	6	
(i)	Land: Urban- 3.72 Katha	Land inherited	Urban: 15.00 Lakhs		Inherited	Rs. 30,000.00
	Land: Rural-8 Bighas		Rural: 4.8 Lakhs	Own		(From Rural
			(,		agriculture
						land)
(ii)	Housing: One RCC	Cost: 15.00 Lakhs	Rs. 12.00 Lakhs		Own	Nil
	Building (Two story)	Year 2015				
		(Bank Loan)				

Signature:-

Name:- Dr. Nilutpal Kakatil eterin

Designation:- Veterinary Officer

STATEMENT OF MOVABLE PROPERTY FOR THE CALENDER YEAR ENDING, 2023

Name of the Officer:- Dr. Nilutpal Kakati

Designation:- Veterinary Officer

- 1. Pay:- Rs. 79,540.00
- 2. Cash Bank Balance, Credit and other movable:-

SI.	Description of Items	Value (In Rupees)	In which Name (Wife, Child,	Date and manner of	Remarks
No.			Dependent and other relation)	acquisition	
1	2	3	4	5	6
(i)	Jewelry	Rs. 1,00,000.00	Own	Purchased	
(ii)	Motor	Rs. 13,00,000.00	Own	Year-2009 Wagon R	
		(Bank Loan)	(Bank Loan)	Year-2017 Royal Enfield	
				Bullet	-
				Year-2018 Renault Capture	
(iii)	Refrigerator	Rs. 30,000.00			
(iv)	T.V.	Rs. 34,000.00			

Signature:-

Name:- Dr. Nilutpal Kaka

Designation:- Veterinary Officer

Date

Statement of Immovable Property for the Calendar Year Ending 31st December/2022

Name of the Officer: Dr. Nilutpal Kakati

Designation: Veterinary Officer

2) Pay: Basic: 79,540

Total Allowance: 34,007

Gross Pay: 1,13,547

Total Deduction: 10,608

Net Salary: 1,02,939

SI.	Precise Location	Nature	Extent of	Land-use Pattern	Value of th		If not in own	How acquired, whether by	Annual	Remark
No.		of	Interest	(Particulars of	House/Bu	House/Building/Flat		purchase, lease, mortgage,	Income	
,	- 3, , ,	Land		House/Building/ Flat over the Plot of Land)	At the Time of Acquiring/ Purchase	Present Value	whose name & His/Her relationship to the officer	inheritance, gift or otherwise with dates of actualization & name with details from whom acquired	from the property	
1	2	3	4	5	6	7	8	9	10	11
1	Mouza: Morigaon Revenue Town/ Village : Morigaon		The state of the s		, , , , , , , , , , , , , , , , , , ,		. 5		10	
	Patta No. : 546 Dag No. : 648	Residential	Nil	One Residential building for self	8,00,000	15,000,00	Own	Inherited	Nil	
	Net Area: 3.12 Katha		- 1 d							
	Mouza: Morigaon Revenue Town/ Village : Oujari Pathar	tan i				1 k				
	Patta No. : 4 Dag No. :216	Agriculture	Nil	Agriculture Land	2,00,000.00	4,80,000	Own	Inherited	30,000	
ľ	Vet Area: 8 Bigha		· .							Ž.

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

Date:

(Signature of the officer of State Veterinary Dispense

Statement of Movable Property for the Calendar Year Ending 31st December/2022

1) Name of the Officer (Block Letter) : DR. NILUTPAL KAKATI

Designation: VETERINARY OFFICER

2) Pay: Basic: 79,540

Total Allowance: 34,007

Gross Pay: 1,13,547

Total Deduction: 10,608

Net Salary: 1,02,939

A) Cash, Bank Balance, Credit and other Movable Properties

SI. No.	Description of Item	Value	In whose name (self, wife/husband child, dependent, other relation of benamdar) the asset is	d, Date & Manner of acquisition	Remarks
1	Cash in Bank	3	4	5	-
		1,10,000	Self	Salary	0
2	Jewellery	1,00,000	Wife	Purchased	All IV
3	Vehicle	13,00,000	Self		(Wedding)
4	TV	34,000		Bank Loan (2018)	
5	Pofice		Self	2019	1.
	Refrigerator	30,000	Self	2020	
6	Motor Cycle	80,000	SIf		
			311	Bank Loan (2017)	F 9

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

Date:

(Signature of the Officer)

Veterinary Officer

B) Expenditure

G.P.F./C.P.S. Account	Marable C II		enature			
No.	Monthly Contribution	Insurance F	Policy	Number of those in course of	Monthly cost of maintaining family	
		Annual Premium Amount	Policy Nos.	education with monthly expenditure thereon		
1	2	3	4	5		
* · · · · · · · · · · · · · · · · · · ·		Rs. 9,156	409235984			
		Rs. 36,604	409249282	20,000.00	20,000.00	
		Rs. 33,643	486754452			
	-					
				A		
		4-4-				
				1 , 1		

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

Date:

Veterinary Officer
State Veterinary Dispensar

(Signature of the Officer)