


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

1) Name of the Officer : **DR. JAHAN ARA BEGUM** Designation : **Research Officer (RO), TB & BRUCELLOSIS, Animal Health Centre (AHC), Khanapara, Guwahati-22**
 2) Pay : Basic : **Rs.86180.00** Total Allowance : **Rs. 42216.00** Gross Pay : **Rs. 128396.00** Total Deduction : **Rs. 36108.00** Net Salary: **Rs. 92288.00**

Sl. No.	Precise Location	Nature of Land	Extent of Interest	Land-use Pattern (Particulars of House/Building/ Flat over the Plot of Land)	Value of the Land and House/Building/Flat		If not in own name, state in whose name & His/Her relationship to the officer	How acquired, whether by purchase, lease, mortgage, inheritance, gift or otherwise with dates of actualization & name with details from whom acquired	Annual Income from the property	Remarks
					At the Time of Acquiring/ Purchase	Present Value				
1	2	3	4	5	6	7	8	9	10	11
1	Flat no.5 B, Seujee Enclave, MRD Road, Chandmari, Guwahati-3	Residential	50%	Self Occupied	Rs. 1216000/-	Rs. 4000000/-	Jointly owned property with husband Dr. Razibuddin Ahmed Hazarika	Purchased through Housing Loan from LIC Housing Finance Limited	Nil	

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

Date : 23-08-2023


 (Signature of the Officer)
Training Manager
Cum
RO TB & Brucellosis
A.H. & Veterinary Deptt, Assam
Chenikuthi, Guwahati-3

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

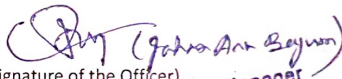
- 1) Name of the Officer (Block Letters) : **DR. JAHAN ARA BEGUM** Designation : **Research Officer (RO), TB & BRUCELLOSIS, Animal Health Centre (AHC), Khanapara, Guwahati-22**
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A) Cash, Bank Balance, Credit and other Movable Properties

Sl. No.	Description of Item	Value	In whose name (self, wife/husband, child, dependent, other relation of benamdar) the asset is	Date & Manner of acquisition	Remarks
1	2	3	4	5	6
1	Cash in hand	5421.00	Self	----	
2	Bank Balance	12853.00	Self	---	
9	Car (Maruti S-Presso)	510000.00	Self	11/18/2020	

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B) Expenditure

G.P.F./C.P.S. Account No.	Monthly Contribution	Insurance Policy		Number of those in course of education with monthly expenditure thereon	Monthly cost of maintaining family
		Annual Premium Amount	Policy Nos.		
1	2	3	4	5	6
ASA/VET/9981	11000.00	Nil	Nil	2 (Two) Rs. 30000.00	Rs. 75000.00

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Date : 23-08-2023


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