



ELECTION COMMISSION OF INDIA

Register for Maintenance of Day to Day Accounts by

Contesting Candidates

Part A

Name of the Candidate: Yerrolla Dharshan							
Name of the Political Party (if any):							
Constituency from which Contested: 66- CHARNINAR							
Date of Declaration of Result: 03-12-2025							
Name and address of Election Agent:							
Total Expenditure incurred / authorized:							

(From the date of nomination to the date of declaration of result of election, both dates inclusive)

This is to Cortify that this register

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the underso gred with geaf So Signature for

the Purpose of Register for maintenance

of Day to Day Accounts by Contacting

Candidate in respect of 66- chaming

Assembly Constituting

RETURNING OFFICER
66-Charminar Assembly Constituency &
Zonal Commissioner, CRZ, GHMC

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1		2		Total Amount in		82	6	7	8	9
Date of	Nature of	Expenditure	A CONTRACTOR OF THE PERSON NAMED IN COLUMN 1	Rupees (Paid +	Name & Address of Payee	BILLING.	Amount incurred/authorised by	Amount incurred/authorised by	Amount incurred/authorised by other	
Expenditure / Event]	Description	Quantity	Rate per Unit	Outstanding) Sooof		Voucher No.			individual/association/body/any other (mention full Name & Address	Remarks, if any
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lı .	Sparry Polex Notry)		1000/	Hahory shop	Idupons	Candidate			
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11/2020		Nº/								
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Date of Expenditure / Event]	2 Nature of Expenditure			Total Amount in Rupees	Name & Address of Payee	Bit Ng.Char	6 Amount	7 Amount	8 Amount incurred/authorised by other	9
	Description	Quantity	Rate per Unit	(Paid + Outstanding)		No. India	incutred/authorised by Canadidate or his election Agent	incurred/authorised by political party and name of political party	individual/association/hody/any	Remarks, if any
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ELECTION COMMISSION OF INDIA

Cash Register for Maintenance of Day to Day Accounts by

Contesting Candidates

Part B

Name of the Candidate:	7 Warshan
Name of the Political Party (If any):	dependent-
Constituency from which Contested:	5- Charminar A
Date of Declaration of Result:	2-12-2012
Name and address of Election Agent:	

(From the date of nomination to the date of declaration of result of election, both dates inclusive)

This is to Certify that this Register Contains
pages from SINO. It to 100 Issued by the
Undersigned with Seal 4 Signature for the
Purpuse of Register for mathteriance of
Day to Day Accounts by Contesting Candidate
in Respect of 66-Charminar Assembly
Constituency.

RETURNING OFFICER

66-Charminar Assembly Constituency &
Zonal Commissioner, CRZ, GHMC

	RECEIPT	PAYMENTS			
Date	Name & address of person/party/association/body /any other from whom the amount received.	Receipt No	Amount	Bill No./Voucher No. and Date	Name of Payee & Address
1	2	3	4	5	6
1		3	4.		

») neuc		A-rount	Remarks if any		
PAYMENT	S	Balance Amount			
Nature of Expenditure	Amount	Places at which or person with whom the balance is kept (if cash is kept at more than one place/persons, mention name and address available.)	Any expense mentioned in colomn 7 of this table and not mentioned in colomn 2 of table of Part A should be clarified here.		
	8	9	10		
7					
Woundn fee	5000/_				
Station Him	1000/_	,			
	6000/-	,			
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ELECTION COMMISSION OF INDIA

Bank Register for Maintenance of Day to Day Accounts by

Contesting Candidates

Part C

Name of the Candidate: Yesrolla Dhorshau Name of the Political Party (if any): Today audit
Name of the Political Party (if any):
Constituency from which Contested: 66-Chowana
Date of Declaration of Result:
Name and address of Election Agent:
Name of the Bank Purific National Bank Branch Address Account No. 156410170013560

(From the date of nomination to the date of declaration of result of election, both dates inclusive)

This is to Carlify that this Register Conbins
pages from SI. No. 1 to 100 Issted by the
Undersigned with Seal + Signature for the
Durpuse of Register for maintenance of
Day to Day Account by Contesting Candidate
in Respect of 66-Charminar Assembly Constituency.

RETURNING OFFICER
66-Charminar Assembly Constituency &
Zonal Commissioner, CRZ, CHMC

	DEPOSIT	S		ı	PAYMENTS	Charman)			Remarks if any	
Date	Name & address of Person/party/association/body /any other from whom the amount received / deposited in bank	Cash / Cheque No., Bank Name & Branch	Amount	Cheque No.	Name of Payee	PAYMENTS Nature of Expenditure Amount		Balance	Any expense mentioned in colomn 7 of thi table and not mentioned in colomn 2 of tab of Part A should be clarified here.	
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