COM- 10/11/23



## **ELECTION COMMISSION OF INDIA**

Register for Maintenance of Day to Day Accounts by

# **Contesting Candidates**

### Part A

Name of the Candidate:	4 Ahmed Shaik.
Name of the Political Party (if any):	Vidhyarthula Rajakiya Posty 58- Malak pet
Constituency from which Contested:	58- Malak pet
Date of Declaration of Result:	03/12/23.
Name and address of Election Agent:	93093/8254
Total Expenditure incurred / authorized:	

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

CERTIFICATE,

This is to castify that, Register for communications of Day to day Accounts by the contesting cardiolates Part-1A' Containing pages trom our to 100 (Total pages 100)

Returning Officer,

58-Malakpet Assembly Constituency &
Special Deputy Collector (U.L.C) Hyderabad.

1	2			3	4	
Date of spenditure /	Nature of Exp	enditure		Total Amount in Rupees	Name & Address of Payee	
Event)	Description	Description Quantity Rate per Unit Outstanding)				
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12/11/23	THA	-	-		NIL	
13/11/22	NIVL	-	5		NIL	
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15/11/23	MILL	-	-		NIC	
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Bill No. / Voucher No.	Amount incurred/authorised by Candidate or his election Agent	Amount incurred/authorised by political party and name of political party	Amount incurred/authorised by other individual/association/body/any other (mention full Name & Address	Remarks, if any
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1	2			3	4
Date of	Nature of Exp	enditure		Total Amount in Rupees	Name & Address of Payee
ependiture / Event}	Description	Quantity	Rate per Unit	(Paid + Outstanding)	
17/11/22	NILL	-	- 0		NIL
12/1/23	NILE	-	-	-	N/L
19/11/23	HILL	-	-	+	AIL
Estulac	NILL	-	-	-	NIC
21/11/2	MILL	-	-		NIC
22/0/23	NILL	-	-	-	NU
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Bill No. / Voucher No.	Amount incurred/authorised by Candidate or his election Agent	Amount incurred/authorised by political party and name of political party	Amount incurred/authorised by other  Individual/association/body/any other (mention full Name & Address	Remarks, if any
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Date of Expenditure / Event) Description Quantity		enditure		Total Amount in Rupees	Name & Address of Payee	
	Quantity	Rate per Unit	(Paid + Outstanding)			
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24/1/23	_ NIL -			_	del	
25/11/23	-NIL-		+		Nu	
26/11/2	-NIC-	-		_	NIL	
2010/2	-NIL-		+		Nu	
28/11/22	-NIL-		-	-	NU	
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Bill No. / Voucher No.	Amount incurred/authorised by Candidate or his election Agent	Amount incurred/authorised by political party and name of political party	Amount incurred/authorised by other individual/association/body/any other (mention full Name & Address	Remarks, if any
NIL	MIL			
MIL	NIC	7.0		
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Date of Expenditure /	Nature of Exp	penditure		Total Amount in Rupees	Name & Address of Payee
Event)	Description Quantity Rate per (Paid + Unit Outstanding),	-,			
29/1/23	- NIC	- Nh	-NL	NIT OCOOL	NIL
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112/2	- N4	-pu	-NIL	NC	N/L
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3/140	- NII	- 111	-pic	NIL	An
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		0	=	10,000	
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5	6	7	8	9	
Bill No. / Voucher No.	Amount incurred/authorised by Candidate or his election Agent	Amount incurred/authorised by political party and name of political party	Amount incurred/authorised by other individual/association/body/any other (mention full Name & Address	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

	AM AHMED SHAIK
Name of the Political Party (if any):	MALAKPET. PARTY
Date of Declaration of Result:	
Name and address of Election Agent: _	8309318254

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

Maintenance of day to day accounts by the contesting candidates fast-'B' containing pages from our to 1000 (Total pages 100)

Returning Officer,
58-Malakpet Assembly Constituency &
Special Deputy Collector (U.L.C) Hyderabad.

	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
selular	VIIIA		_	29/0/23	RO melated
11/1/19	NIL		-	N/L	200
11/11/13	MIL		-	PIL	211
3/1/13	HIL	-		NIC	NIL
4/11/25	NIL	-		Nu	~u
15/1/28	UIL		-	NIL.	ar L
16/11/23	אוע	_		PIC	Nex
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-	Inspection can	in 0	dex		
	2,	000		1	EXPENDITURE OBSERVER
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PAYMENTS		Balance Amount	Remarks if any
Nature of Expenditure	Amount	Places at which or person with whom the balance is kept (if cash in kept at more than one place/persons, manifon 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.
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	RECEIPT	S			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
7/1/1/13	MILL	NH-	بالم	pil	RII
11/13	MILL	NI	MIL	FIL	NII
11/23	NILL	MIL	NIC	N/L	NII -
0/11/13	NILL	NET	N/L	NIL	NIC
11/1/19	INILO	ATL	MIL	Pu	NIC
Hillia	MICO	NIL	DIL	NIC	NIL
		-1			No.
	Inspection car	sorted	Out a	l en	23/1/23
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PAYMENTS	5	Balance Amount	Remarks if any
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 oddrass excitable.)	Any expense mentioned in colomn 7 of this table and not mentioned in colomin 2 of table of Part A should be clarified here.
7	8	9	10
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	RECEIPT	S			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
231/23		N			NIL
24/h/23		N/			Nu
95/1/1/2		N	11-		Nu
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27/1/10		M	L		NIL
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PAYMENTS		Balance Amount	Remarks if any
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.
7	8	9	10
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	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
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PAYMENTS		Balance Amount	Remarks if any
Nature of Expenditure	Amount	Places at which or person with when the fedence is kept (if cash is kept at reare than one place/persons, mention name and address available.)	Any expense mentioned in colomn 7 of this table and not mentioned in colomn 7 of table of Part A should be clarified here
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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: APA	MAHMED SHAIR DHYARTHULA RAJAKI 18-MALAKPET PARTY
Name of the Political Party (if any):	DHYARTHULA RAJAKI
Constituency from which Contested: 5	18-MALAKPET PARTY
Date of Declaration of Result:	3/12/2023.
Name and address of Election Agent:	8309318254
Name of the Bank	
Branch Address	
Account No.	

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

Maintenace of Day to day accounts by the contesting candidates. Part-1 c' containing pages from 00, to 100 (40 teal pergus 100)

Returning Officer,

58-Malakpet Assembly Constituency &
Special Deputy Collector (U.L.C) Hyderabad.

DEPOSITS				PAYMENTS		
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	
1	2	3	4	5	6	
10/11/23	NIL	Ntc	NIC.	ALL	NC	
11/1/13	MIL	MIL	TAIL	NIL	N/L	
12/1/23	MIL	MIL	Til	NIC	AL.	
13/1/23	MIL	HL	MIC	NIC	NIC	
1911/2	NIL	PHL	ATL	NIL	NIC	
N/2	MIL	ML	NIL	NIC	NI.	
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PAYMENT	S	Balance	Remarks If any		
Nature of Expenditure	Amount	Balance	Any expense mentioned in colomn 7 of this table and not mentioned in colomn 2 of table of Part A should be clarified here.		
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	DEPOSIT	S		1	PAYMENTS
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	Chaque No.	Name of Payee
1	2	3	4	5	6
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PAYMENTS			Remarks If any	
Nature of Expenditure	Amount	- Balance	Any expense mentioned in colomn 2 of this table and not mentioned in colomn 2 of table of Part A should be clarified here.	
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DEPOSITS			PAYMENTS		
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
1	2	3	4	5	6
य विष्य		NIL		N/C.	NIC
41/19		MIL		NIL	NI.
4113		NI	_	DIC	NIC
96/4/2)		N	a-	Na	NIL
27/1123	-	-N	11 -	ML	NIC
14/2		NI	-	NU	NIL
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PAYMENT	S	200	Remarks if any	
Nature of Expenditure	Amount	Balance	Any expense mentioned in colomn 7 of this table and not mentioned in colomn 2 of table of Part A should be clarified here.	
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DEPOSITS					PAYMENTS	
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	
1	2	3	4	5	6	
29/11/23	- 111.	NU	MIL	NIC	NI	
24/1/23	- N1(-	MLL	ALL	Nu	NIC	
1140	- NIC-	NL	NIC	Nu	Nu	
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PAYMENT	s	The state of the s	Remarks If any	
Nature of Expenditure Amount		Balance	Any expense mentioned in colorn 7 of this table and not mentioned in colorn 2 of table of Part A should be clarified here.	
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