CHANDIGARH ADMINISTRATION Form 26 (See rule 4A)

Affidavit to be furnished by the candidate before the returning officer for election to
Name of the House from constituency(name of the constituency)
I, son/daughter/wife of
Aged about years, Resident of
Candidate at the above election, do hereby solemnly affirm/state on oath as under:-
1. I am/am not accused of any offence(s) punishable with imprisonment for two years or more in a Pending case(s) in which a charge(s) has/ have been framed by the court(s) of competent jurisdiction.
If the deponent is accused of any such offence(s) he shall furnish the following information
(i) Case/First information report No./Nos. [(ii) Police station(s)]
District (s) State(s)
(iii) Section(s) of the concerned Act(s) and short description of the offence(s) for which the can
didate has been charged
(iv) Court(s) which framed the charge(s)
(v) Date(s) on which the charge(s) was/were framed
(vi) Whether all or any of the proceeding(s) have been stayed by any court(s) of competent
jurisdiction
2. I have been/have not been convicted of an offence(s) [other than any offence(s) referred to in sub-section (1) or sub-section (2), or covered in sub-section (3), of section 8of the Reapers nation of the People Act, 1951 (43 of 1951)] and sentenced to imprisonment for one year or more. If the deponent is convicted and punished as aforesaid, he shall furnish the following information.
(i) Case/First information report No./Nos.
(ii) Court(s) which punished
(iii) Police station(s)
District (s) State(s)

(iv) Section(s) of the concerned Act(s) and short des	scription of the offence(s) for which the	
Candidate has ever been charged		
 (v) Date(s) on which the sentence (s) was/were pronounced (vi) Whether the sentence(s) has/have been stay jurisdiction 	red by any court(s) of competent	
	~ []	
Place	Date	
Signature of deponent		
VERIFICATION		
I, the above-named deponent, do hereby verify and declare Correct to the best of my knowledge and belief, no p concealed therein.		
Verified at This	Day of	
	Signature of deponent	
Note: The columns in this Form which are not appl	icable to the deponent may be struck off."	