

Government of Puducherry  
Form A  
(See Rule 2)

Statement of assets and liabilities filed by

.....  
.....(  
name and designation of the  
public servant) for the period ..... to  
.....

1. Name :

2. Permanent address with Telephone No.,  
if any :

3. Name of the members of the family and  
his relationship :

4. Present monthly income :

5. Liabilities

(a) Nature extent and other :  
particulars of liability and  
the date when it was incurred

(b) Nature and address of the :  
person to whom the public  
servant is liable

I, ..... do solemnly declare that  
the information  
furnished above is true and that nothing has been omitted therefrom.

Signature of the Public Man