



ALL INDIA JAN SAMASHAYANIVARAN PARTY

J.S.P

National President : G.M. Khan

National Office : Ward no.1, Kalmeshwar Tah.: Kalmeshwar
Dist. Nagpur Pin : 441501 (Maharashtra State)

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प्रति : ~~मुख्य निवडणुक अधिकारी~~
~~महाराष्ट्र राज्य राज्य कापीलय~~

बोधिये,

~~मुख्य निवडणुक अधिकारी, महाराष्ट्र राज्य राज्य कापीलय~~ से फोन क्र. EXP-2015/प्र.क्र. 338/15/33 हमें प्राप्त हुआ। "आइ. जे. जन समशयानिवारण पार्टी" से कुछ जानकारी देने कहा गया है।

इसलिये हम निम्नलिखित जानकारी पत्र के साथ आपके भिजवा रहे हैं।

- 1) The contribution Reports in form 24A
- 2) The Audited Annual Accounts with Auditors report
- 3) The Election Expenditure Statements.
- 4) Income tax return for the fin. year 2014-15

कृपया पत्र के संदर्भ में हमें जल्दी ही जवाब दें।

धन्यवाद

प्रतिक्रिया :

- 1) मुख्य चुनाव अधिकारी को लिखनी
- ✓ 2) मुख्य निवडणुक अधिकारी महाराष्ट्र राज्य
- 3) होम मिनिस्टर दि विफ इलेक्शन ऑफिसर को ज्ञात - 01

A. I. JAN SAMASHAYANIVARAN PARTY

National President

Gen. Secretary

Treasurer

FORM 24A

(See Rule 85B)

(This form should be file with the Election Commission before the due date for furnishing a return of the political party's income of the concerned financial year under section 139 of the Income Tax Act,1961 (43 of 1961) and a certificate to this effect should be attached with the Income-Tax to claim exemption under the Income-Tax Act, 1961 (43 of 1961).)

1	Name of the Political Party	All India Jan Samasyanivaran Party
2	Status of the Political Party	Registered Un-Recognised
3	Address of the headquarter of the political Party	Ward No.1, At Post & Tehsil – Kalmeshwar, District- Nagpur.
4	Date of registration of political Party with Election Commission of India	25 th September, 2014.
5	Permanent Account Number	AADAA5881F
6	Ward/ Circle where return of the Political Party is filed.	ITO WARD 7(1). Nagpur.

Details of Contribution Received, in excess of rupees Twenty Thousand, during the financial year 2014-15.

S.No	Name and complete address of contributing person/ Company	Amount of Contribution (Rs.)	Mode of Contribution (Cheque/ Demand Draft/ Cash)	Remak
1	N.A	N.A	N.A	N.A

*In case of payment by Cheque /demand draft, indicate name of the Bank and Branch of the Bank on which the cheque/ Demand draft has been drawn.

7. In case the contributor is company, whether the conditions laid down under section 293 A of the Companies Act,1956 (1 of 1956) have been complied with (A copy of the certificate to this effect obtained from the Company should be attached.) N.A

Verification

I, **Gulam Gous Pathan**, son of **Mohd Ismail Pathan** Solemnly declare that to the best of my knowledge and belief, the information given in this form is correct, complete and truly stated.

I further declare that I am verifying this form in my practice as President on behalf of the Political Party above named and I am also competent to do so.

Date: 28.09.2015

Place: Nagpur



(Gulam Gous Pathan)

President

(Signature and name of the Authorized Person)

A. I. JAN SAMASHAYANIVARAN PARTY

President Gen. Secretary Treasurer

A. I. JAN SAMASHAYANIVARAN PARTY



President

Gen. Secretary



Treasurer

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