

स्थायी लेखा संख्या /PERMANENT ACCOUNT NUMBER



AAJPD2091D



नाम /NAME

ANINDYA DASGUPTA

पिता का नाम /FATHER'S NAME

ANIL BEHARI DASGUPTA

जन्म तिथि /DATE OF BIRTH

02-10-1949

हस्ताक्षर /SIGNATURE

आयकर आयुक्त (कम्प्यूटर कोष)

Commissioner of Income-tax(Computer Operations)

629836/17828834-77084/1-4/RESWS/02-03

MR.ANINDYA DAS GUPTA/INDRANI DAS GUPTA

F-26/10 SEC-7
ROHINI
NEW DELHI
DELHI - INDIA - 110085

Your Base Branch :ROHINI, DELHI BRANCH, PLOT NO.
7, COMMUNITY CENTRE, S.D. TOWER, SEC-8, ROHINI,
110085

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NEVER SHARE your Card number, CVV, PIN, OTP, Internet Banking User ID or Password with anyone, even if the person claims to be a bank employee. Sharing these details can lead to unauthorised access to your account.

STATEMENT SUMMARY for Customer ID: XXXX5296 in INR as on January 31, 2020

RELATIONSHIP	BALANCE
Savings Account Balance(A)	1,84,950.22
Fixed Deposits linked to Savings Account Balance(B)	0.00
Total Savings Account Balance(A + B)	1,84,950.22
Current Account Balance	0.00
Total Fixed Deposits Balance	0.00
Total Recurring Deposits Balance	0.00
TOTAL DEPOSITS	1,84,950.22



सत्यमेव जयते

INDIA NON JUDICIAL

Government of National Capital Territory of Delhi

e-Stamp

Certificate No.	: IN-DL17420943999943S
Certificate Issued Date	: 30-Jan-2020 12:38 PM
Account Reference	: IMPACC (IV)/ dl778903/ DELHI/ DL-DLH
Unique Doc. Reference	: SUBIN-DL77890343003249623693S
Purchased by	: DR A DASGUPTA
Description of Document	: Article 4 Affidavit
Property Description	: Not Applicable
Consideration Price (Rs.)	: 0 (Zero)
First Party	: DR A DASGUPTA
Second Party	: Not Applicable
Stamp Duty Paid By	: DR A DASGUPTA
Stamp Duty Amount(Rs.)	: 10 (Ten only)



Please write or type below this line

Adasgupta



Statutory Alert:

1. The authenticity of this Stamp Certificate should be verified at "www.ncdstamp.com". Any discrepancy in the details on this Certificate and as available on the website renders it invalid.
The onus of checking the legitimacy is on the users of the certificate.
In case of any discrepancy please inform the Competent Authority.

AFFIDAVIT

I, **DR. A. DASGUPTA** S/O LATE DR. A.B. DASGUPTA, R/O F-26/10, SECTOR-7, ROHINI, DELHI-110085, do hereby solemnly affirm and declare as under:-

1. That I am an Indian citizen.
2. That I am the Proprietor of **Dr. Dasgupta's Laboratory & Eye Clinic**, at F-26/10, Sector-7, Rohini, Delhi-110085.
3. That it is my true and correct statement.

A Dasgupta

DEPONENT

VERIFICATION:-

Verified at Delhi on this **31st day of January 2020**, that the above said contents and affidavit are true and correct to the best of my knowledge and belief and nothing has been concealed therefrom.

A Dasgupta

DEPONENT



ATTESTED

[Signature]
NOTARY PUBLIC
DELHI (INDIA)

30 JAN 2020