



1042	Page-02		1
	ВΫ		6. 2. 1
1.Srl Gourt Sankar	Sow.		
2.Srl Nirod Baran	Sow 2		A.
3. Sri Biman Sow		7 am	
4. Sri Aden Sow			143
5. Sri Adhir Sow	//	er ere Dhanad	ahri Sow
6. Sri Narayan S	Sow all are sons of	of Late Dilagoo	
7. Sri Uttam Sh		4.	
8. Sri Subhas S	show		1 2 3 4 7
9. Sri Bikas Sh	ow	~ .	- K
10.Sri Prakash	Show	مستر Naha Kur	nar Show.
11.Sri Tapas S	Show all are sons	Late Maps Ke	mar Show
12.Smt. Anna	Kali Show wife (of Late Naba K	Contd: P/

- 13] Sri Asit Baran Singha
- 14] Sri Biswajit Singha
- 15] Sri Satyajit Singha all are sons Of Late Sudhir Singha
- 3mt. Hira Rani singha wife of Uma Pada Singha
- Smt. Niva Rani Singha wife Of Mahabir Prasad singha
- (18) Sri Hiralal Show
- [9] Sri Shyamlal Show both are sons of Late Ajit Show
- 20] Sri Nihar Show son Of Late Khetra Nath Show 17 11 1997
- 21] Sri Batuk Nath Show
- 22] Sri Sastipada Show
- all are sons Of Late Ranjit Show
- 23] Sri Swapan Show

vendor as in Sl.No-16 to 23 are represented their constituted attorney Sri Mahadev Singha son of Late Lalit Mohan Singha and Srikanta Singha son Of Late Ananda Mohan Singha

24)Smt.Purnima Orang

25) Sri Arjun Ornag

26) Sri Bhim Orang

Wife Of Late Dasharath Ornage both are sons Of Late Bhadu Orange

22) Smt. Pramila Dhangar Wife Of Late Labu Dhangar

All the above said vendors are resident of Village- Dhandabag P.O-Amrai P.S-Durgapur Dist-Burdwan by faith-Hindu by Nationality Indian by occupation- Service/Business /cultivation /House wife {Hereinafter called the VENDORS First part), which expression shall unless the context otherwise requires include their heirs /successors and representative of the VENDORS.

In Favour Of:-

BGA Realtors [PAN CARD No- AAHFB 6714 F] having its regd. Office at P-399, Hemanta Mukhopadhyay Sarani Kolkata-700029 represented by its partner Bimolendu Ghose son of Late S.P.Ghosh hereinafter called the "PURCHASER(S) (which term or expression shall unless excluded by or repugnant to the subject to context be deemed to mean and include its successors and legal representatives, administrators and assigns) of the SECOND PART.

WHEREAS the "A" Schedule Property originally belonged to "Dhajadhari Show" who purchased the same from the then owner and vendor no-01 to 06 acquired the same by way of inheritance and from the date of inheritance they are owning ,possessing and seizing every right title and interest with having unfettered power and authority to convey the same.

AND WHEREAS the "B" Schedule Property originally belonged to "Nabakumar Show" whose name duly recorded in records of Right and vendor no-07 to 12 acquired the same by way of inheritance and from the date of inheritance they are owning ,possessing and seizing every right title and interest with having unfettered power and authority to convey the same.

AND WHEREAS the "C" Schedule Property originally belonged to "Sudhir Singha " whose name duly recorded in records of Right and vendor no-13 to 15 acquired the same by way of inheritance and from the date of inheritance they are owning ,possessing and seizing every right title and interest with having unfettered power and authority to convey the same.

AND WHEREAS the "D" Schedule Property originally belonged to "Paritosh Bala Singha " whose name duly recorded in records of Right and vendor no-16 and 17 acquired the same by way of gift vide deed no-7912 and 7913 Of 1987 and from the date of acquisition in the above said manner they are owning ,possessing and seizing every right title and interest with having unfettered power and authority to convey the same.

AND WHEREAS the "E" Schedule Property originally belonged to "RAKHAL CHNADRA SHOW " whose name duly recorded in records of Right and after his demise the said property devolved upon his only sons Khetra Nath Show who left behind three sons namely Ajit Show [now deceased], Nihar Show and Ranjit Show [now deceased]. Contd..P/5



And Whereas said Ajit Show left his two sons namely Hiralal Show and Shyamlal Show.

And Whereas said Ranjit Show died leaving three sons namely Batuk Nath Show , Sastipada Show and Sri Swapan Show .

And the vendor no-18 to 23 acquired the same by way of inheritance and from the date of inheritance they are owning and possessing the same as rightful owner.

AND WHEREAS the "F" Schedule Property originally belonged to "Nani Bala Debi wife of Late Debendra Nath Bandhopadhya" and after her death Sri Tara Pada Bandhopadhya being son acquired the same by way of inheritance and transferred an area of 66 decimal out of 149 decimal in favour of Indra Kora and an area Of 66 decimal by a regd deed of sale being no-8187 Of 1961 in favour of Sajani Dasi and Geni Dasi

And Whereas said Indra Kora transferred his purchased area of 66 Decimals by way of regd deed of sale being no- 148 Of 1962 in favour of Tara Pada Bandopadhya who further transferred the same in favour of father of vendor no-1-6

And Whereas said "Geni Dasi further transferred her purchased share of 33 decimals the same by way of sale being no- 959 Of 1974 in favour of Basanta Kumar Das who further transferred area of 25 decimals out of 33 decimals the same by a regd. Deed of sale being no-3009 Of 1976 in favour of Bhadu Orang who died leaving behind two sons Arjun Orang , Bhim Orang and son's wife Smt.Purnima Orang

And Whereas Smt. Geni Bala Dasi transferred her rest portion i.e 8 decimals and due to death of her sister Swajani Dasi being only successor an area of 33 decimals in favour Of Pramila Dhangar vide deed no- 1629 Of 1981.

And all the vendors acquired a valid, good ,clear and free marketable title in the above said manner and they are owning and possessing and seizing every right title interest over the same as real and true owner with having all sorts of right of transfer.

-30

And whereas the schedule below landed property as in schedule-A to G are not properly cultivated due to want of water and several industry have already erected in and around the schedule below land for which there is no further chances for cultivation as such all the vendors jointly decided to sale the same for getting liquid cash in hand and also in order to meet their lawful demand, proclaimed to sale the schedule mentioned property on a consideration of Rs. 1,02,49,398/-[One Core Two Lakhs Forty Nine Thousand and Three Hundred Ninety Eight Only], all that total area of 401 Decimal Mouza-Dhandabag , Police Station-Durgapur Sub Registry Office Durgapur District: Burdwan which is more particularly marked, butted and bounded and delineated in red in the annexed site plan.

NOW THIS IDENTURE WITNESSETH that in consideration of the said consolidated price of Rs.1,02,49,398/-[One Core Two Lakhs Forty Nine Thousand and Three Hundred Ninety Eight Only],], the PURCHASER has paid this day as unto and on account of the VENDOR whose representative hereby acknowledges the receipt of the said sum as per the said Memorandum of Payments And the VENDORS doth hereby grants, transfers sells conveys assures and assigns its, right, title, interests and possession in, to and over the said land and properties as described in the Schedule written herein below along with the right easements and prescriptions attached or annexed thereto to the used and control of the PURCHASER, its, successors , assigns and legal representatives in all that land, hereditaments, tenements, messages, properties as described in the Schedule written herein below and attached and annexed thereto along with passages, rights, liberties, privileges easements, prescriptions and profits whatsoever to the said land and premises and properties as fully described in the Schedule written herein below and anywise appertaining thereto or usually held on enjoyed therewith or reputed to belong to or to be appurtenant thereto free from all encumbrances and charges of any kind, Decree or so on of the past or any suit or claim at present, all encumbrances and charges of any kind, Decree or so on of the past or any sult or claim at present, 'liens whatsoever without having subjected to any kind of transfer or agreement therefore or notice for requisition and/or acquisition whatsoever from or by any authority in law of the land whatsoever nor having subjected to any alignment or developmental Scheme by any authority under the vunnannannannanna

~~~~~law of the land, and TO HAVE AND TO HOLD hereditaments and land as aforesald and the described in the Schedule written herein below transferred, delivered, assured, sold and conveyed unto the use of the said PURCHASER its successors, legal representatives, administrators and assigns and the VENDORS COVENANTS with the said PURCHASER AND declare that the VENDORS is /are otherwise also well seized and possessed of land as fully described in the schedule written herein below which have not in any way been encumbered and free from any acquisition or requisition proceeding and the said PURCHASER its successors, legal representatives, administrators and assigns shall and may at all times peacefully and quietly possess and enjoy the said land and structures and properties as referred to herein above and described in the Schedule written herein below and hereditaments, claim or demand whatsoever therewith, thereof, thereon and thereto form or by the said VENDORS or any person claiming through the VENDORS and the VENDORS hereby delivers all relevant papers documents deeds etc. as to title of the land and properties mentioned above and described in the Schedule written herein below and further covenants that such other paper, document, or deed which may come under control and possession of the VENDORS or any person claiming under the VENDORS will deliver the same unto the PURCHASER forthwith .

AND WHEREAS the PURCHASER(S) shall be factually legally entitle to get their names or name of their company recorded in the records of B.L.& L.R.O. Durgapur and to mutate its name into the rent roll of Govt. West Bengal ,Durgapur Municipal Corporation , Electricity and water supply authority and will be able to pay any rent, rates, charges without any connection or concerned whatsoever with the vendors and from the date of this sale deed the purchaser shall regularly pay holding tax and land taxes in respect of schedule property to its free choice but all outgoings in connections with the schedule land before execution of this sale deed if found that shall be paid and cleared of by the VENDORS.



AND WHEREAS the said PURCHASER(s) shall have the right to sale, mortgage, lease out, let out and/or transfer to any person or company whatsoever the said land and property as referred to hereinabove and as fully described in the Schedule written herein below.

AND THAT the said VENDORS and any person claiming under it shall and will for all times to come at the request and cost of the PURCHASER(s), its successors, legal representatives, administrators and assigns, do or cause to be done or execute or cause to be executed all such acts and things or Deed or Deeds whatsoever for further and more perfectly assuring the right, title and interest of the PURCHASER in and to the said land and property as referred to hereinabove and as fully described in the Schedule written herein below or any part thereof and the VENDORS further covenants that if it transpires that the land, and property as hereby conveyed, transferred, sold, assigned or assured by the VENDORS is not free from all or any encumbrances as hereinabove stated according to law of the land the VENDORS Indemnities and states that they or in absence of themselves their legal heirs jointly or severally will be liable to remove all ambiguity or the defect of their title by their own cost.

The vendor bind(s) themselves to declare that schedule below plot have not been gifted, sold out, transferred or indemnified for any liability or entered into any agreement with any third party or subjuidice of any court or been notified for any kinds of requisition and vendors sale out the same to purchaser having good marketable title without any kinds of encumbrance.

AND WHEREAS if the land as fully described in the Schedule written herein below hereby transferred, sold and conveyed or acquired or requisitioned by State or any Statutory Authority or any such authority under law of the land, the PURCHASER shall be entitled to get all compensation amount in full and the VENDORS, its successors-inoffice.



The Company of the Co

AND WHEREAS the VENDORS doth hereby delivers peaceful khas possession of the land and property free from encumbrances and lien as referred to herein above and fully described in the Schedule written herein below as sold, conveyed, transferred, and assured hereby unto and in favour of the PURCHASER upon execution of these presents.

Be it noted that Vendor no-24 to 27 belong to schedule tribe for which they already obtained necessary permission for sale from the competent authority at Asansoi being case no-L.P 234 and 235 [ASN] Of 2007\_Copy Of order file herewith\_

# SCHEDULE OF LAND AND PROPERTY AS SOLD, TRANSFERRED CONVEYD AND ASSURED AS REFERRED TO HEREINABOVE

## SCHEDULE "A" [Vendor No-1 to 6]

All that piece and parcel of land within -Mouja- Dhandabag J.L. No-66, P.S-Durgapur District-Burdwan of Raiyati Sithiban BAID [ AGRICULTURAL] land comprising in

|           | 209-127 Service | Kh.No               | Ar   | ea      |
|-----------|-----------------|---------------------|------|---------|
| Mouja     | Plot No         |                     | 24 ( | decimal |
| Dhandabag | 624             | Rs-76[LR.Kh2582]    | 66   | Decimal |
| -Do-      | 615 [LR-1125]   | KS-10[CK.KII. 200-2 |      |         |

Total In 2 Plots~~~90 Decimals \*

## SCHEDULE "B" [Vendor No-7 to 12 ]

All that piece and parcel of land within -Mouja- Dhandabag J.L. No-66, P.S-Durgapur District-Burdwan of Raiyati Sithiban BAID [ AGRICULTURAL] land comprising in

|           | 930 TIBERS        | Kh.No   | Area       |
|-----------|-------------------|---------|------------|
| Mouta     | Plot No<br>RS-624 | RS-422  | 30 Decimal |
| Dhandabag | LR-1105           | Kri-541 | Contd.Pag  |



## SCHEDULE "C" [Vendor No-13 to 15 ]

All that piece and parcel of land within -Mouja- Dhandabag J.L. No-66, P.S-Durgapur District-Burdwan of Raiyati Sithiban BAID [ AGRICULTURAL] land comprising in

| AGRICULTURALI | Total Control | Kh.No | Area                      |
|---------------|---------------|-------|---------------------------|
| Mouja         | Plot No       | RS-78 | 70 Decimal                |
| Dhandabag     | RS-614        | K5-70 | V25021613527575 5 1515277 |

## SCHEDULE "D" [Vendor No-16 & 17 ]

All that piece and parcel of land within -Mouja- Dhandabag J.L. No-66, P.S-Durgapur District-Burdwan of Ralyati Sithiban BAID [ AGRICULTURAL] land comprising in

| AGRICULTURAL) |         | Kh.No  | Area                 |
|---------------|---------|--------|----------------------|
| Mouja         | Plot No | RS-78  | 132 Decimal          |
| Dhandabag     | RS-614  | 1,5 ,0 | Carron Marian Carron |

## SCHEDULE "E" [Vendor No-18 to 23 ]

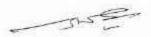
All that piece and parcel of land within -Mouja- Dhandabag J.L. No-, 66, P.S-Durgapur District-Burdwan of Raiyati Sithiban BAID [ AGRICULTURAL] land comprising in

| 1000 000  | Plot No | Kh.No              | Area       |
|-----------|---------|--------------------|------------|
| Mouja ·   |         | RS-76,[LR-552,553] | 13 Decimal |
| Dhandabag | RS-615  | K3-70/LIK 33-75-3  |            |

## SCHEDULE "F" [Vendor No-24 to 26]

All that piece and parcel of land within -Mouja- Dhandabag J.L. No-66, P.S-Durgapur District-Burdwan of Raiyati Sithiban BAID [ AGRICULTURAL] land comprising in

| T .       | Disk No | Kh.No   | Area         |  |
|-----------|---------|---------|--------------|--|
| Mouja     | Plot No | RS-76   | 25 Decimal . |  |
| phandabag | RS-615  | 118 108 | 1            |  |



#### Page-11

#### SCHEDULE "G" [Vendor No-27]

All that piece and parcel of land within -Mouja- Dhandabag J.L. No-66, P.S-Durgapur District-Burdwan of Raiyati Sithiban BAID [ .. AGRICULTURAL] land comprising in

| Mouja     | Plot No | Kh.No | Area       |
|-----------|---------|-------|------------|
| Dhandabag | RS-615  | RS-76 | 41 Decimal |

All that total area of 401 decimals in schedule "A to G" and plots are fully described and delineated in red border in the site plan annexed herewith which is part and parcel of this deed which butted and bounded as follows :-

On North: Plot No. 625, 626 and Part Plot of 614 On South: Plot No. 623, 622, 621, 615, 613, 666

On East: Plot No. 658 & 664 On West: 200ft, Wide Link Road

It is hereby declared that the full name, colour passport size photograph and finger prints of each fingers of both the hands of VENDORS and the purchaser are attested in additional pages in this deed and the same are treated as part and parcel of this deed.

IN WITNESS WHEREOF the VENDOR after going through the contents of this deed, which read over and explained by their appointed advocate doth hereby subscribes, their hand on this 22nd day of January 2008.

WITNESSES:

ताम - मुन्यासमा । मैगामेंड

2. Sushanta Delenatz 4. 241 er (1977).

F/Name - Ramani Mohan 5. 22 6.8/2 (SF)

Delenatz

Dhanfalug DoTP-3 6. Maggan 9012

1 शारामेडी मार्केड राजी / . .

4. त्रा भारत या (अर्थे /

Signature Of vendors

Drafted by me
and typed by me & read over
and explained in mother languages
to all vendors and they admits it to be
correct and sign in my presence.

.21.

Jnanendra Nath Sinha
Advocate
Reg No-WB-468/80

Signature Of VENDORS

sni Kutisingla.

Mahadeb Single

as constituted Attorny

of Smt Hira Rani Single

Smt Niva Rani Single

Smt Niva Rani Single

Smi Hiradal Show

Smi Shyamlal Show

Smi Nihan Show

Smi Batuk nath Show

Smi Sasti pada Show

Smi Swapan Show

Smi Swapan Show

| 111                                                                                                                                  | Seller       | S      | pecimen 4       | orm tor         | Len Tingi   | erprints |
|--------------------------------------------------------------------------------------------------------------------------------------|--------------|--------|-----------------|-----------------|-------------|----------|
| 1/                                                                                                                                   |              | Little | Ring<br>( Left  | Middle<br>Hand) | Fore        | Thumb    |
|                                                                                                                                      |              | *      | ***             |                 |             |          |
|                                                                                                                                      |              | Thumb  | Fore<br>( Right | Middle<br>Hand) | Ring        | Little   |
| THE THE AND STORY OF THE STORY  I share Plane and Funger prints of both limits continued and attented by me.  THE TOWN TO SENTE TOWN | 1            |        |                 |                 |             | *        |
|                                                                                                                                      |              | Little | Ring<br>( Left  | Middle<br>Hand) | Fore        | Thumb    |
|                                                                                                                                      |              |        |                 |                 |             |          |
| = 1 year air (m-                                                                                                                     | 1            | Thumb  | Fore<br>(Right  | Middle<br>Hand) | Ring.       | Little   |
| hands creating and ancited in me                                                                                                     | The state of |        |                 |                 |             |          |
|                                                                                                                                      |              | tle    | Ring<br>(Left   | Middle<br>Hand) | Fore        | Thumb    |
|                                                                                                                                      |              |        |                 |                 |             |          |
| 3 (Barrat Car)                                                                                                                       | 7            | Thumb  | Right           | Middle<br>Hand) | Ring        | Shipte:  |
| Photo                                                                                                                                |              |        |                 |                 |             |          |
| 35                                                                                                                                   |              | Little | Ring<br>( Left  | Middle<br>Hand) | <b>Fore</b> | Thumb    |
|                                                                                                                                      |              | • //   |                 |                 |             |          |
| a Charchy                                                                                                                            |              | Thumb  | Fore<br>(Right  | Middle<br>Hand) | Ring        | Litter   |
| end of the fire and transport produced from the treatment and produced from the                                                      | 7            |        |                 | ( )?            | 1           |          |

ŗ

Per .

| 11                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             | Seller | 98 3   | Specimen !       | Form For        | Ten Fing | gerprints |
|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------|--------|------------------|-----------------|----------|-----------|
| 7                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              | •      | Little | Ring<br>( Left   | Middle<br>Hand) | Fore     | Thumb     |
|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |        |        |                  |                 |          |           |
| A 548 A                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        |        | Thumb  | Fore<br>( Right  | Middle<br>Hand) | Ring     | Little    |
| state there and target proceed both bands enclosed and streeted for me                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                         | . /    |        |                  |                 |          |           |
|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |        | Little | Ring<br>( Left   | Middle<br>Hand) | Fore     | Thumb     |
| No raylan 300                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  |        |        |                  |                 |          |           |
| Y.                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             |        | Thumb  | Fore<br>( Right  | Middle<br>Hand) | Ring     | Entile    |
| Non-Cryta at SAW                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               |        |        |                  |                 | •        | *         |
|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |        | Little | Ring<br>(Left    | Middle<br>Hand) | Fore     | Thumb     |
| Service Servic |        |        |                  |                 |          |           |
| -                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              |        | Thumb  | Fore<br>( Right  | Middle<br>Hand) | Ring     | Little    |
| that Photo and Finger penns of both hands enclosed and attented by me.                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                         |        |        |                  |                 |          |           |
|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |        | Little | Ring<br>(Left    | Middle<br>Hand) | i Fore   | Thomas    |
|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |        |        |                  |                 |          |           |
| 1 35 F                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                         |        | Thumb  | Folgar<br>(Right | Middle<br>Hand) | Ring     | Hattle    |
| Produce the result known pears on bottle books one insect and also send for my                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 |        | \$     |                  | ů.              | ##D      | *         |

|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                | Little | Ring*<br>(Left  | Middle<br>Hand)   | Fore                                          | Thumb  |
|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------|-----------------|-------------------|-----------------------------------------------|--------|
|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |        |                 |                   |                                               |        |
|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                | Thumb  | Fore<br>( Right | Middle<br>Hand)   | Ring                                          | Little |
| a Solvent Photo and Finger pents of both hambs enclosed and attested by me.                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    | V.                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             |        |                 |                   | <i>(</i> ************************************ |        |
|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                | Little | Ring<br>(Left   | Middle<br>Hand)   | Fore                                          | Thumb  |
|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |        |                 |                   |                                               |        |
| कास्त प्रमा                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                | Thumb  | Fore<br>(Right  | - Middle<br>Hand) | Ring                                          | Littic |
| Come Processed stringer process of hor<br>results and more stringer process of hor<br>results are commented to the                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             | 1                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              |        |                 |                   | A.                                            | 1      |
| Directo                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                | Little | Ring<br>(Left   | Middle<br>Hand)   | Fore                                          | Thund  |
|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |        |                 |                   |                                               | 72.7   |
| Tale                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                           |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                | Thumb  | Fore<br>( Righ  | Middle<br>t Hand) | Ring                                          | Little |
| Tabas Show and Fanger pams of the hards enclosed and offered by the Tabas Shows                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                | 100                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                            |        | ili.            |                   | (mail                                         |        |
|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                | 3000   | Ring<br>( Left  | Middle<br>Hand)#  | Fore                                          | Thumb  |
|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                | and the same of th |        |                 | 3.7               | **                                            |        |
| 130-12 A                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                       | -                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              | Thumb  | Fore<br>( Rigl  | Middle<br>Hand)   | Ring                                          | Linte  |
| the second substitution of the second |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |        | 68              |                   |                                               |        |

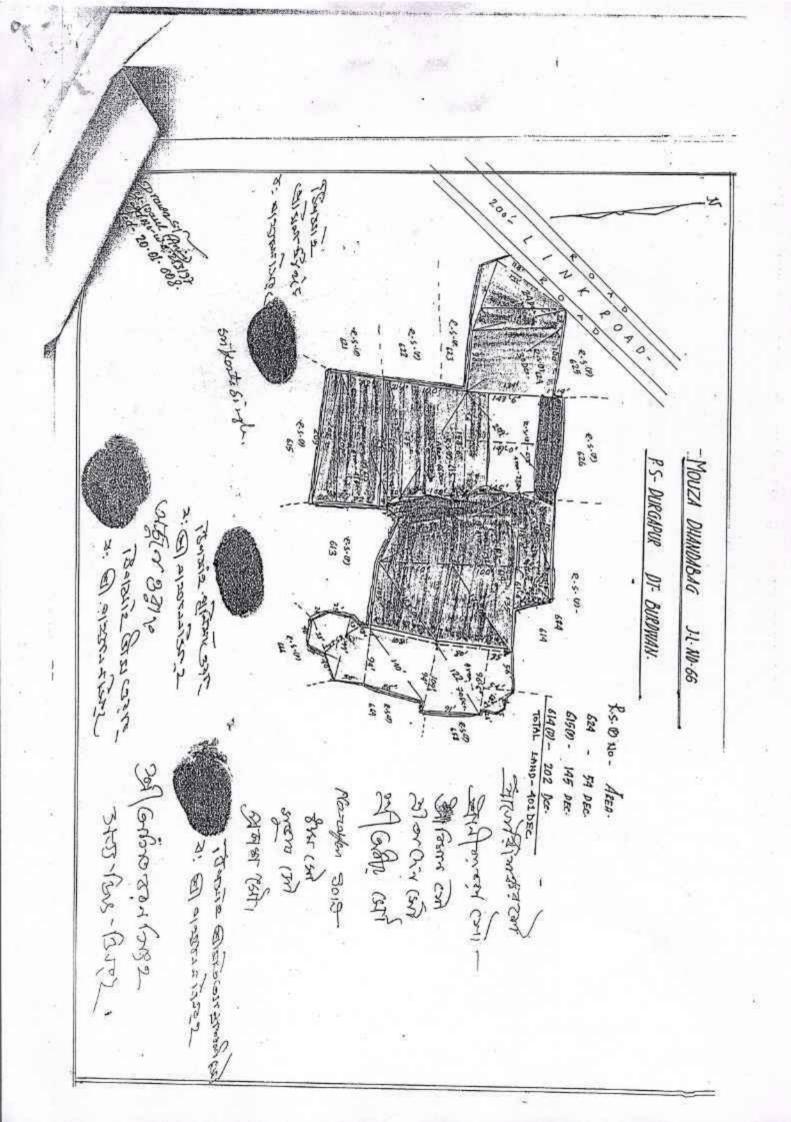
Company of the Compan

|                                                                           | eller      | Little   | Ring<br>( Left     | Middle Hand)                | Fore | Thumb       |
|---------------------------------------------------------------------------|------------|----------|--------------------|-----------------------------|------|-------------|
|                                                                           |            |          | ( Left             | Hand)                       |      |             |
|                                                                           |            | <b>4</b> |                    | 9                           |      |             |
| 3 Journa souths                                                           | -          | Thumb    | Fore<br>(Right     | Middle Hand)                | Ring | \$\$ Little |
| a same Photo and Furger processed both tombs enclosed and attended by me. |            |          |                    |                             |      |             |
|                                                                           |            | Little   | Ring<br>( Left     | Middle Hand)                | Fore | Thamb       |
|                                                                           | 2          |          |                    |                             |      |             |
|                                                                           |            | Thumb    | Fore<br>( Right    | Middle<br>Hand)             | Ring | Little      |
| M - 1884 AS BG 2                                                          |            |          | 8                  |                             |      |             |
|                                                                           |            | Little   | Ring<br>( Left     | Middle<br>Hand)             | Fore | Thumb       |
| 5467 (COVE)                                                               | <b>-</b> , |          |                    |                             |      | 64.         |
|                                                                           | 1          | Thumb    | Right<br>(Right    | भे भेडिडिवीe<br>क्रांक्रति) | 架ing | A Phile     |
| Colour Phone and Engage prints of fishing mands you have lossed the mag   |            |          |                    |                             |      |             |
|                                                                           |            | -17/1    | Ring<br>(Left      | Midule<br>Hand)             | Fore | Thumb       |
|                                                                           |            |          |                    |                             |      |             |
| Mahade Single                                                             | -/         | Thumb    | Verifore<br>(Right | Middle<br>Hand)             | Ring | 1 (790)     |
| Merchand che Style                                                        |            |          |                    |                             |      | À           |

The state of

|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               |     | Little     | Ring<br>i Feli  | Middle<br>Hand)    | Lore           | •Lumai |
|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----|------------|-----------------|--------------------|----------------|--------|
|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               |     |            |                 |                    |                |        |
|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               |     | Thumb      | Fore<br>( Right | Middle<br>Hand)    | Ring           | i mii, |
| Soi Kosta Single                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              |     |            |                 |                    |                |        |
| Photo |     | Liffe      | Ring<br>( Left  | Middle<br>Hand)    | . Fore         | Thumb  |
|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               |     |            |                 |                    |                |        |
| Ba 2007-12                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    | -   | Thumb      | Fore<br>( Right | Middle<br>Hand)    | Ring           | Linie  |
| 13.12 3 4120 men gain                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                         | - [ | <b>V</b> . |                 |                    |                |        |
|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               | 0 4 | Little     | Ring<br>(Left   | Middle<br>Hand)    | Pore           | Thomas |
|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               |     |            |                 |                    |                |        |
| OFFING ENTEL                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  | 1   | Thumb      | Fore<br>( Right | Middle<br>Hand)    | Ring           | Louie  |
| Photo                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                         | /   |            |                 |                    |                | 食      |
| 6.3                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                           |     | Little     | Ring<br>Ch Lefi | Niddle<br>Hand)    | Fore           | Thumi+ |
|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               | 7   | et.        |                 | *                  | <i>**</i> ;    |        |
| 3: Bulsouring                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 |     | Thumb      | Fore<br>Right   | Middle<br>Hand Lan | <b>vic</b> iou | Lan    |
| and the second second second second                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                           |     | A          | A.              |                    | Ca.            | 瀬      |

|                                                                         | Little | Ring<br>(Left    | Middle<br>Hand)   | Fore   | Phant  |
|-------------------------------------------------------------------------|--------|------------------|-------------------|--------|--------|
| Photo                                                                   |        | 7                | 4                 |        |        |
|                                                                         | Thumb  | Fore<br>( Right  | Middle<br>Hend)   | Ring - | Little |
| Colour Physica and Empter primes of british franch and masteri by me    |        |                  |                   |        |        |
| Bhoto 5- 6010-03177 124 5-                                              | Little | Ring<br>( Left   | Middle<br>Hand)   | Fore   | Thumb  |
|                                                                         |        |                  |                   |        |        |
| Single                                                                  | Thumb  | Fore<br>( Right  | Middle<br>Hand)   | Ring   | Little |
| Bimalloan Estas France prints of both Russia Boah Cale Cale Color       |        |                  |                   |        |        |
| Photo                                                                   | Little | Ring<br>( Left   | Middle<br>Hand)   | Fore   | Thumb  |
|                                                                         |        |                  |                   |        |        |
|                                                                         | Thumb  | Fore<br>( Righ   | Middle<br>Hand) i | Ring   | Little |
| term Plant and Finger prints of both hunds onclosed and attested by me. |        |                  |                   |        |        |
| Photo                                                                   | Little | Ring<br>( Left   | Middle<br>Hand)   | Fore   | Thurst |
|                                                                         | 152    |                  | Middle            | Ring   | faith  |
| - Lone Photo and Europe grants (12) 40.                                 | Thun   | ib Fore<br>(Righ | Hand)             | King   | 2 777  |



#### Government Of West Bengal Office of the A. D. S. R. DURGAPUR DURGAPUR

Endorsement For deed Number :1-00434 of :2008 (Serial No. 00385, 2008)

#### 22/01/2008

## Presentation(Under Section 52 & Rule 22A(3) 46(1))

The second second second second

Presented for registration at 18.45 on :22/01/2008, at the Private residence by Gouri Sankar Sow, one of the Executants.

### Admission of Execution(Under Section 58)

Execution is admitted on :22/01/2008 by 1. Pramila Dhangar, wife of Labu Dhangar, Vill. - Dhandabag, P.o. - Amrai, Thana Durgapur, By caste Hindu, by

Identified By Panchanan Singha, son of Lt. Lalit Mohan Singha Vill. Dhandabag, P.o.- Amrai, Durgapur, Dist. Burdwan Thana: Durgapur, by caste Hindu, By Profession : Others.

#### **Executed by Attorney**

1. Execution By Mahadev Singha, son of Lt. Lalit Mohan Singha, Vill.- Dhandabag, P.o.- Amrai, Thana: Durgapur By caste Hindu, by Profession: Business, as the constituted attorney of 1. Hira Rani Singha 2. Niva Rani Singha 3. Hiralal Show 4. Shyamlal Show 5. Nihar Show 6. Batuk Nath Show 7. Sastipada Show 8. Swapan Show is admitted by him. Identified By Panchanan Singha, son of Lt. Lalit Mohan Singha Vill. Dhandabag, P.o.- Amrai, Durgapur, Dist. Burdwan Thana: Durgapur, by caste Hindu, By Profession : Others.

> Name of the Registering officer : Malay Chakraborty Designation :ADDITIONAL DISTRICT SUB-REGISTRAR OF DURGAPUR

#### On 28/01/2008

#### Admissibility(Rule 43)

Admissible under rule 21 of West Bengal Registration Rule, 1962 duly stamped under schedule 1A Article number 23 of Indian Stamp Act 1899, also under section 5, of West Bengal Land Reforms Act, 1955; Court fee stamp paid Rs.-10/-

#### Payment of Fees:

Fee Paid in rupees under article : A(1) = 326161/-

on:28/01/2008

#### Certificate of Market Value(WB PUVI rules 1999)

Certified that the market value of this property which is the subject matter of the deed has been assessed at Rs-29651484/-

> [Malay Chakraborty] ADDITIONAL DISTRICT SUB-REGISTRAR OF

DURGAPUR OFFICE OF THE ADDITIONAL DISTRICT SUB-REGISTRAR OF

DURGAPUR

BULL

Govt. of West Bengal

#### Government Of West Bengal Office of the A. D. S. R. DURGAPUR DURGAPUR

Endorsement For deed Number :1-00434 of :2008 (Serial No. 00385, 2008)

Certified that the required stamp duty of this document is Rs 2075604 /- and the Stamp duty paid as: Impresive Rs-5000

Deficit stamp duty: Rs 2070610/- is paid by the draft no. :124381, Draft date:22/01/2008, Bank name:STATE BANK OF INDIA, Ballygunge, recieved on :28/01/2008.

## Admission of Execution(Under Section 58)

Company of the Automotive

- 1. Gouri Sankar Sow, son of Lt. Dhagadahri Sow, Vill. Dhandabag, P.o. Amrai, Thana Durgapur, By caste Execution is admitted on :28/01/2008 by
  - 2. Nirod Baran, Sow, son of Lt. Dhagadahri Sow, Vill. Dhandabag, P.o. Amrai, Thana Durgapur, By caste Hindu, by Hindu, by Profession : Service
  - 3. Biman. Sow, son of Lt. Dhagadahri Sow, Vill. Dhandabag, P.o. Amrai, Thana Durgapur, By caste Hindu, by Profession : Cultivation
  - 4. Aden Sow, son of Lt. Dhagadahri Sow, Vill. Dhandabag, P.o. Amrai, Thana Durgapur, By caste Hindu, by Profession : Cultivation
  - 5. Adhir Sow, son of Lt. Dhagadahri Sow, Vill.- Dhandabag, P.o.- Amrai, Thana Durgapur, By caste Hindu, by Profession :Cultivation
  - 6. Narayan Sow, son of Lt. Dhagadahri Sow, Vill. Dhandabag, P.o. Amrai, Thana Durgapur, By caste Hindu, by Profession : Cultivation
  - 7. Uttam Sow, son of Lt. Naba Kumar Sow, Vill.- Dhandabag, P.o.- Amral, Thana Durgapur, By caste Hindu, by Profession : Cultivation
  - B. Subhas Sow, son of Lt. Naba Kumar Sow, Vill. Dhandabag, P.o. Amrai, Thana Durgapur, By caste Hindu, by Profession :Business
  - 9. Bikas Sow, son of Lt. Naba Kumar Sow, Vill, Dhandabag, P.o. Araral, Thana Durgapur, By caste Hindu, by Profession :Business 10. Prakash Sow, son of Lt. Naba Kumar Sow, Vill. - Dhandabag, P. 6. - Amrai, Thana Durgapur, By caste Hindu, by Profession :Business
  - 11. Tapas Sow, son of Lt. Naba Kumar Sow, Vill. Dhandabag, P.o. Amral, Thana Durgapur, By caste Hindu, by Profession :Business
  - 12. Anna Kali Sow, wife of Lt. Naba Kumar Sow, Vill. (Dhandabag, P.o.- Amrai, Thana Durgapur, By caste Hindu, by Profession :Business
  - 13. Asit Baran Singha, son of Lt. Sudhir Singha, Vill. Dhandabag, P.o. Amrai, Thana Durgapur, By caste Hindu, by Profession : House wife
  - 14. Biswajit Singha, son of Lt. Sudhir Singha, Vill, Dhandabag, P.o.- Amrai, Thana Durgapur, By caste Hindu, by Profession :Service
  - 15. Satyajit. Singha, son of Lt. Sudhir Singha, Vili. Dhandabag, P.o. Amrai, Thana Durgapur, By caste Hindu, by Profession :Service Profession :Service

[Malay Chakraborty] ADDITIONAL DISTRICT SUB-REGISTRAR OF

OFFICE OF THE ADDITIONAL DISTRICT SUB-REGISTRAR OF DURGAPUR

Govt. of West Bengal

# Government Of West Bengal Office of the A. D. S. R. DURGAPUR DURGAPUR

Endorsement For deed Number :I-00434 of :2008 (Serial\*No. 00385, 2008)

16; Purnima Orang, wife of Lt. Dasharath Orang, Vill. - Dhandabag, P.o. - Amrai, Thana Durgapur, By caste

17: Arjun Orang, son of Lt. Bhadu Orang, Vill. - Dhandabag, P.o. - Amrai, Thana Durgapur, By caste Hindu, by Profession: Cultivation

18. Bhim Orang, son of Lt. Bhadu Orang, Vill. - Dhandabag, P.o. - Amral, Thana Durgapur, By caste Hindu, by Profession: Cultivation

Identified By Panchanan Singha, son of Lt. Lalit Mohan Singha Vill. Dhandabag, P.o.- Amrai, Durgapur, Dist. Burdwan Thana: Durgapur, by caste Hindu, By Profession 'Others.

#### Executed by Attorney

Execution By Srikanta Singha, son of Lt. Ananda Mohan Singha, Vill.- Dhandabag, P.o.- Amrai, Thana: Durgapur By caste Hindu, by Profession: Cultivation, as the constituted attorney of 1. Hira Rani Singha 2. Niva Rani Singha 3. Hiralal Show 4. Shyamlal Show 5. Nihar Show 6. Batuk Nath Show 7. Sastipada Show 8. Swapan Show is admitted by him. Identified By Panchanan Singha, son of Lt. Lalit Mohan Singha Vill. Dhandabag, P.o.- Amrai, Durgapur, Dist. Burdwan Thana: Durgapur, by caste Hindu, By Profession: Others.

Name of the Registering officer :Malay Chakraborty
Designation :ADDITIONAL DISTRICT SUB-REGISTRAR
OF DURGAPUR

[Malay Chakraborty]
ADDITIONAL DISTRICT SUB-REGISTRAR OF DURGAPUR

OFFICE OF THE ADDITIONAL DISTRICT SUB-REGISTRAR OF DURGAPUR

Cox Govt of West Bengal .

Registered in Book - I CD Volume number 2 Page from 585 to 609 being No 00434 for the year 2008.



(Malay Chakrabout) 28-January-2008 ADDITIONAL DISTRICT SUB-REGISTRAR OF DURGAPUR Office of the A. D. S. R. DURGAPUR West Bengal

## GOVERNMENT OF WEST BENGAL

Office of the Revenue Officer & Brob Ward Classes Welfare Officer
ASANSOL

(Under Chap - II (A) of W.B.L.R. Act. 1955)

|        |                                                      |                                             | OKDER                |                      |                        |
|--------|------------------------------------------------------|---------------------------------------------|----------------------|----------------------|------------------------|
|        | Memo No                                              | Case No. L.P.                               | BCW (ASN)<br>235     | (ASN)                | ated                   |
| Phile: | MIEWING Sril                                         | Smt. Purnima Or                             | ang                  | S/G, W/C L           | t.Dasarath Orang,      |
| 1/2    | Jen Call                                             | Sri Arjun Oran                              |                      | S/0.L                | t.Bhadu Orang,         |
| A 10 - | ASAMSOL S                                            | Srl Bhim Orang                              |                      | s/c.                 | -do-                   |
|        | Sub-castes                                           | RANG                                        |                      | ermission to sell    |                        |
|        | Dec/Acre(s) of his                                   | her holdings in one                         | dued to Sri/Smt      | Var. Non. nent       | TORS. P-399 Hemant     |
|        |                                                      |                                             |                      | resented by A        | .G. Partner Sri        |
|        | Bimalendu Gno                                        | se, S/O.Late S                              | C.Chose,             |                      |                        |
| 4      |                                                      |                                             | 115 C. 1987          |                      |                        |
| 100    | No. L.P. 235                                         |                                             | (ASN) of             |                      | mission under Case     |
|        | transfer of holding<br>3. Where s the<br>Purchase of | (s) to a person(s) a<br>purpose of the prop | osed sale is for inv | estment towards      |                        |
|        | 4. Whereas the                                       | modersigned after c                         | etc. of the Sch. Tr  | of contents and gri  | ounds of the petition  |
|        | for obtaining  5. The permissi                       | permission has been on is hereby granted    | to Sch. Tribes rai   | yat(s) to sell the h | olding(s) U/S 14(c) of |
|        | the W.B.L.R                                          | Act. 1955 viz                               |                      |                      |                        |
|        | Dist : Burdwan                                       | PS Di                                       | rgapur, Mouza        | Dhandabag,           | JL No. 66,             |
| Sili   | Khatian No.                                          |                                             | Plai No              | Area                 |                        |
|        | R.S.                                                 | L.R.                                        | R.S.                 | LR                   |                        |
|        | 76,                                                  |                                             | G15,Faid             |                      | 0.25 Acres             |
|        |                                                      |                                             |                      |                      |                        |

#### GOVERNMENT OF WEST BENGAL

Office of the Revenue Officer & Back Ward Classes Welfare Officer

(Under Chap - II (A) of W.B.L.R. Act. 1955)

ORDER

|     | .n | ø |    | _  | N.I |    |    |
|-----|----|---|----|----|-----|----|----|
| 771 | 77 | ı | em | o: | rs  | Œ. | 20 |
|     |    |   |    |    |     |    |    |

BCW (ASN) Case No. L.P. 234

Dated ... (ASN) of 2007

S/O, W/O Lt.Labu Dhangar,



A N G has prayed for permission to sell 0.41

Dec/Acre(s) of his/her holdings in one deed to Sri/Smt M/S. BGA REALTORS ... P-399. Hemanta Mukhopadhyay Sarani, Kolkata-700029, Represented by M.G. Partner, Bimalendu Ghose, S/O.Late S.C.Ghose, E WER

a person (s) not belonging to any Schambe(s) and

2. Whereas, the Schambe raiyat(s) has tiled a petition for obtaining permission under Case f (ASN) of 2007 No. L.P.: 234

transfer of holding(s) to a person(s) not belong to any Sch Tribes and

3. Whereas the purpose of the proposed sale is for investment towards

Purchase of land ..... etc. of the Sch. Tribes raivat(s) and

Whereas the undersigned after careful observation of contents and grounds of the petition for obtaining permission has been satisfied himself and hence -

The permission is hereby granted to Sch. Tribes raiyat(s) to sell the holding(s) U/S 14(c) of

the W.B.L.R. Act. 1955 viz

| Dist : Burdwan | PS Durgapur, MouzaDhandabag, .IL No. 66, |           |        |             |  |  |
|----------------|------------------------------------------|-----------|--------|-------------|--|--|
| Khatian No.    |                                          | Plot No.  | Area · |             |  |  |
| R.S.           | L.R.                                     | R.S.      | L.R.   |             |  |  |
| 76,            |                                          | 615, Baid |        | 0.41 Acres. |  |  |
|                |                                          | 2         |        |             |  |  |
|                |                                          |           |        |             |  |  |
|                |                                          |           |        |             |  |  |

Dec/Acre(s) of land for Rs

99.385/-

not belonging to any Sch. Tribe(s) for the purpose(s) mentioned above and ;