



FORM 24A
[See rule 85B]

- 1 Name of Political Party **RASHTRIYA ANYAY NIVARAN SENA**
- 2 Status of the Political Party (recognised/unrecognised) **Unrecognised**
- 3 Address of the headquarters of the political party: **138, JAHAGIRDARWADI, PO SHINGOLI, TEHSIL & DISTT USMANABAD MAHARASHTRA 413501**
- 4 Date of registration of Political Party with Election Commission **56/106/2019-19/ PPS-1 dt 03/10/2019**
- 5 Parmanent Account Number (PAN) and Income-tax ward/Circle where return of the political party is filed: **AAABR4249L**
- 6 Details of the contributions received, in excess of rupees twenty thousand, during the Financial Year 2019-20: **NIL**

| Sl No. | Name and Complete address of the contributing person/company | PAN (if any) and Income-Tax Ward/Circle | Amount of Contribution Rs. | Mode of Contribution *(Cheque/demand draft/Cash) | Remarks |
|--------|--|---|----------------------------|--|---------|
| | | NIL | | | |

*In case of payment by cheque/demand draft, indicate name of the bank and branch of the bank on which the cheque/demand draft has been drawn.

- 7 In case the contributor is a company, whether the conditions laid down under section 293A of the companies Act, 1956(1 of 1956) have been complied with (A Copy of certificate to this obtained from the company should be attaced).

Verification

I **Ashok Gopichand Chavhan**, son of **Sh Gopichand Rupchand Chavhan** Solemnly declare that to the best of my knowledge and belief, the information given in this form is correct, complete and truly stated.

I further declare that I am verifying this form in my capacity as **National President**. On behalf of the political Party above named and I am also scometent to do so.

Date **24/12/2020**
Place **USMANABAD**


Ashok Gopichand Chavhan
National President
RASHTRIYA ANYAY NIVARAN SENA





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[See rule 85B]

US (TR)

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Verification

I **Ashok Gopichand Chavhan**, son of **Sh Gopichand Chavhan** Solemnly declare that to the best of my knowledge and belief, the information given in this form is correct, complete and truly stated.

I further declare that I am verifying this form in my capacity as **National President**. On behalf of the political Party above named and I am also scometent to do so.

Date **26/12/2020**
Place **USMANABAD**


Ashok Gopichand Chavhan
National President
RASHTRIYA ANYAY NIVARAN SENA

