

**FORM III**

**(See Rule 4)**

1. Name of the member (in block letters) :
2. Father's / Mother/s name :
3. Permanent Address :
4. Shillong Address :
5. Date of election :
6. Party affiliation as on -
  - (i) Date of election :
  - (ii) Date of signing this form :

**DECLARATION**

I, \_\_\_\_\_ hereby declare that the information given above is true and correct.

In the event of any change in the formation above, I undertake to intimate the Speaker immediately.

Date

Signature of the Member.

Strike out inappropriate words / portions.

(Here mention the name of the person / authority / party,  
as the case may be, who had issued the direction).