

EXTRAORDINARY PUBLISHED BY AUTHORITY

No. 2386, CUTTACK, SATURDAY, JULY 30, 2022 / SARVAN 8, 1944

GENERAL ADMINISTRATION & PUBLIC GRIEVANCE DEPARTMENT

NOTIFICATION

The 30th July, 2022

- **S.R.O. No.512/**2022—In exercise of the powers conferred by Section 57 read with clause (d) of sub-section (1) of Section 2 of the Odisha Lokayukta Act, 2014 (Odisha Act 12 of 2018), the State Government do hereby make the following rules to amend the Odisha Lokayukta (Procedure of filing of Complaint) Rules, 2020, namely:—
- **1. Short title and commencement.—** (1) These rules may be called the Odisha Lokayukta (Procedure of filing of Complaint) Amendment Rules, 2022.
- (2) They shall come into force on the date of their publication in the Odisha Gazette.
- **2.** In the Odisha Lokayukta (Procedure of filing of Complaint) Rules, 2020, for Form-A, the following Form shall be substituted, namely:—

"FORM-A FORM OF COMPLAINT

[see rule 3]

PART A

IF THE COMPLAINT IS FILED IN INDIVIDUAL CAPACITY

- 1. Name of the complainant (in block letters):
- **2.** Age:
- 3. Gender: Male □ Female □ Transgender □
- **4.** Permanent Address
- 5. Present Address:

6.	Identity Proof must be	e enclosed:	
	(Nature of Identity Do	cument attached)	
7 .	Occupation :		
8.	(a) Telephone No.:		(b) Mobile No.:
	(With ISD/STD Co	de)	(With Country Code)
9.	E-mail id:		
10	. Mode of presentation	of the Complaint (ick the box) [see sub-rule (2) of rule 3]
	(a) In Person □	(b) By Post □	(c) Electronically □
	(In case the complain	t is made electron	cally, a physical copy is to be provided to
	the Lokayukta within a	period of fifteen d	ays)
11	. Whether a duly notari	zed affidavit as anr	nexed to this form has been enclosed:
	Yes □	No □	
	It is certified that to	the best of my kno	wledge, belief and information:
	,	·	n present complaint is being made is within
	·	-	s laid down under section 52];
		J	egation of corruption under the Prevention
	•	,	peing made under this complaint is pending
	before any Court	or Committee of	the Legislative Assembly of the State or
	before any other	authority and the	complaint is not barred from being made
	before the Lokayukta under section 15.		
	Place:		Signature of the Complainant/
	Date :		Authorized signatory

PART B

NOT APPLICABLE TO INDIVIDUAL

1.	(a) Whether such organization as referred to above is based in India? (Tick the appropriate column)	he
	Yes □ No □	
	(b) If the answer to (a) above is "YES" then whether the certificate of registration incorporation [as issued by the authority competent to issue such certificate India or by authority competent to issue such certificate as per the regulating law the Foreign State, as the case may be], in respect of such organisation has been enclosed? (Tick the appropriate column) Yes No	in of
	(c) Indicate the name of the Competent Authority which has issued the certificate registration/ incorporation of the organisation:	of
	(d) Address for Correspondence with the Organisation:	
	(e) Telephone No.: (f) Mobile No.:	
	(With ISD/STD Code) (With Country Code)	
	(g) E-mail id:	
2.	Personal details of office bearers and head of the Organisation	
	Furnish details in respect of each Office Bearer and Head of Organisation in the format as contained in Part A of this form. [please see Section 47]	he
	(Attach separate sheets in respect of each individual)	
3.	Details of the person who has Authorised the signatory to file the complaint on behalf of the organisation:	alf
4.	Details of the person authorising the signatory to file the complaint:	
	(a) Name (in block letters):	
	(b) Gender: Male □ Female □ Transgender □	
	(c) Age:	
	(d) Identity Proof must be enclosed:	
	(Nature of Identity document attached)	

(e) Permanent Add	ress of person autho	orizing the Signat	tory:	
(f) Address for corre	espondence:			
(g) Occupation/Des	ignation/Avocation:			
(h) (a) Telephone N	lo.:	(b) Mobile N	No.:	
(With ISD/STD	Code)	(With Coun	try Code)	
(i) E-mail id:			. 10	
	orization document appropriate box)	nas been enclos	ed?	
Yes □	No □			
5. Details of third party (a) Name:		affected by the co	omplaint:	
(b) Gender: Ma	ale 🗆	Female		Transgender
(c) Age: (d) Full Address:				
(e) Telephone No.:		(f) Mobile N	o.:	
(With ISD/STD	Codes)	` ,	untry Code)	
(g) E-mail id:				

PART C

DETAILS AS REGARDS THE PUBLIC SERVANT AGAINST WHOM THE COMPLAINT IS BEING MADE

1.	Name of the public servant(s) against whom complaint is being made:
	(In block letters) *
	* Attach a separate sheet in respect of each public servant against whom a complaint
	is being made.
	Note: Details of third party/ parties, if aware, whose interests are likely to be
	prejudicially affected by the said complaint as contemplated under section 21 may also
	be separately furnished.
2.	Occupation of public servant
	against whom the complaint is
	being made [see Section 14] along
	with present place of posting :
3.	In case the complaint is made against
	any Chairperson/Member/Officer/Employee
	of a Trust or An Association of Persons or Society, indicate:
	Whether the organization is wholly or partly financed by the Government.
	(Tick the appropriate box)
	Yes □ No □
4.	Details of the Cause of Action/offence under the Prevention of Corruption Act, 1988.

	(i) Period during which alleged misconduct was committed.[see Explanation to
	Section 14]
	From To
	(ii) Place of Occurrence :
	(iii) District :
	(iv) State :
5.	Summary of facts/allegation of corruption: (Detailed complaint duly signed to be
	enclosed in separate sheet)
6.	Particulars/List of the documents relied upon by the Complainant in support of
	allegation.
7.	Any other information, the complainant desires to furnish/disclose which may be
	relevant to the inquiry/investigation into the allegation of corruption.
8.	Whether copies of the documents and other material evidence (including electronic
	evidence, if any) relied upon by the complainant and referred to in the complaint have
	been submitted?
	Yes □ No □
9.	If the complaint is being filed electronically whether pdf formats of the documents and
	other material relied upon has been attached to the electronic format of the complaint
	(tick the appropriate box) [see sub-rule (2) of rule 3]
	Yes □ No □
	Place : Signature of the Complainant/
	Date : Authorised Person

PART-D AFFIDAVIT

(To be sworn on a non-judicial stamp paper)

I	years, s/o
	r/o do hereby
	emnly affirm and declare on oath as under-
1.	That I am filing this complaint on my own behalf
	OR
	on behalf of body/Board/ Corporation/ Authority/ Company/ Society/Trust/Association of persons/Non-Governmental Organisation/ Limited Liability Partnership (give its
	name and registration number, if any) having their office at (give contact address)
	email/ phone/fax of the organization) and that I am authorized to sign and make this
	complaint vide its resolution dated
2.	That neither I nor any other person in the Organization/ Institution / body that I
	represent in this complaint has filed any complaint in this matter before any Court or
	Committee of the Legislative Assembly of the State or before any other Authority and
	this complaint does not attract the provisions of section 15.
3.	I state that before filing this complaint I have collected and presented the information
٥.	and supporting evidence to the best of my knowledge, ability and capacity which are
	relevant in support of the allegations of corruption against the concerned public
	servant and I further confirm that I have not concealed any data/material/information
	in this complaint.
4.	That the facts stated in the complaint are true to the best of my knowledge and belief.
٠.	Solemnly affirmed at this this
	of 20
	DEPONENT
	Verification
l	the above-named
dep	onent do hereby verify that the contents of the aforesaid paragraphs 1 to 4 are true
	I correct to the best of my knowledge and belief and nothing is concealed therefrom.
	ified at this day of 20
	DEPONENT"
	[No.21598—GAD-LK-LOK-0002/2019/Gen.]
	By Order of the Governor

Printed and Published by the Director, Printing, Stationery and Publication, Odisha, Cuttack-10 OGP/SBP Ex.Gaz.1756-183+200

SURENDRA KUMAR

Principal Secretary to Government