

122  
147

122-21  
EXLLO 280 240

Tel. No. 612250  
612721

**BSES**

## BSES Limited

ELECTRICITY HOUSE, POST BAG NO. 6808, SANTACRUZ (EAST), BOMBAY 400 055.

| Date of Bill | Date of Bill | CONSUMER NUMBER | CYCLE | BOOK | DEL BOOK |
|--------------|--------------|-----------------|-------|------|----------|
| 10-02-95     | JAN-95       | K13980072       | 14    | 34A  | 23A      |

A T DABREO  
9 REMEDIAN VILLA  
MADONNA COLONY,  
BORIVLI, BOMBAY-92

IN ALL CORRESPONDENCE  
PLEASE QUOTE  
CONSUMER NUMBER,  
CYCLE & BOOK

| TARIFF | METER NUMBER | PRESENT READING | UNITS | METER RENT | ELECTRICITY CHARGE |
|--------|--------------|-----------------|-------|------------|--------------------|
| LF1    | 0266350      |                 | 118   |            | 33987              |
| LF1    | 0251137      |                 | 56    | 100        |                    |

NOTICE:  
Please take notice that you have still not paid the amount of

Rs. 38130  
ment 38130 (Brought forward) and if the amount of arrears is not paid within seven days from the date of receipt hereof the supply of electricity to your premises will be discontinued under the provisions of Section 24 (1) of the Indian Electricity Act, 1910. The supply will be restored thereafter only after the receipt of the payment of all dues and a reconnection fee. This notice does not invalidate any previous notice.

\* PRINTED in electricity charge column No. (6) indicates minimum charge(s)

| Fuel adjustment rate (Paise/Unit) | FUEL ADJUSTMENT CHARGE | OTHERS             | GOVERNMENT DUTY        | TOTAL CHARGES (Col 5 to Col. 9) | ASSESSED BILL ADJUSTMENT (CREDIT) | CURRENT MONTHS BILL AMOUNT(A) |
|-----------------------------------|------------------------|--------------------|------------------------|---------------------------------|-----------------------------------|-------------------------------|
| 24.150                            | 1787                   | 00                 | 2142                   | 38016                           |                                   | 38016                         |
| PREVIOUS TOTAL BILL AMOUNT        | PAYMENT RECEIVED       | ADJUSTMENT         | NET(B) BROUGHT FORWARD | TOTAL BILL (A+B) AMOUNT         |                                   |                               |
| Rs. P.                            | Rs. P.                 | CODE AMOUNT Rs. P. | Rs. P.                 | Rs. P.                          |                                   |                               |
| 76130                             | 38000                  |                    | 00                     | 38130                           | 76146                             |                               |

Receipt of Payment made by cheque is issued subject to realisation of cheque.

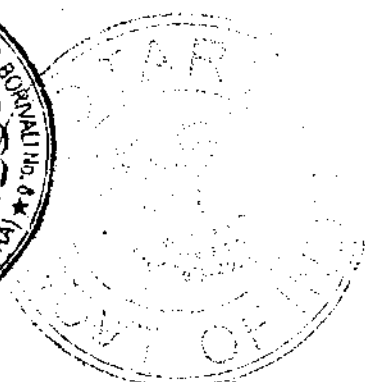
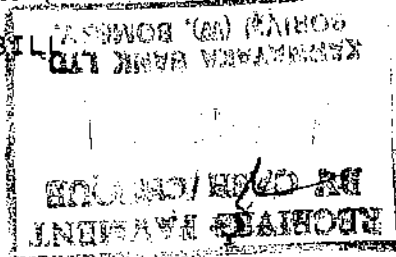
EXECUTIVE DIRECTOR Payment received after 28-02-95 not accounted Produce receipt at counter of acceptance of net amount

| DUE DATE FOR CURRENT MONTH'S BILL ONLY | ROUND SUM NOW PAYABLE |
|----------------------------------------|-----------------------|
| 28-02-95                               | 76146                 |
| CR = CREDIT                            | E.S.C.E               |

PAYMENT TO BE MADE AT AUTHORISED COLLECTION CENTRES ONLY AND OBTAIN RECEIPT  
Please do not pay cash at site to any person towards the bill/other charges

IMPORTANT MESSAGES : ( For detailed explanation of notes, please see overleaf)

REF NOTE-1 ASSESSED BILL



- Payment Slip

|      |     |     |
|------|-----|-----|
| EXCC | 902 | 240 |
|------|-----|-----|

प्रत्येक बीमा प्रमाणिकर्ता- V ख (विनियम 3 देखें) FORM IRDA-AGENT-VB(SEE REGULATION 3)



**बीमा विनियामक और विकास प्राधिकरण (बीमा अभिकर्ता अनुज्ञापन) विनियम, 2000**  
**INSURANCE REGULATORY AND DEVELOPMENT AUTHORITY (LICENSING OF INSURANCE AGENTS)**  
**REGULATIONS, 2000.**

**बीमा विनियामक और विकास प्राधिकरण, हैदराबाद INSURANCE REGULATORY AND DEVELOPMENT AUTHORITY, HYDERABAD**

अनुज्ञापन सं० LICENCE NO: **1154635**

बीमा अधिनियम, 1938 (1938 का 4) के भाग 2 के अधीन बीमा अभिकर्ता के रूप में कार्य करने के लिए अनुज्ञापन  
 LICENCE TO ACT AS AN INSURANCE AGENT UNDER PART II OF THE INSURANCE ACT, 1938 (IV OF 1938)

बीमा अभिकर्ता का नाम:  
 NAME OF INSURANCE AGENT:

**GERARD DA3REO**

पता:  
 ADDRESS:

**FLAT NO. 9, 2ND FLOOR, REMEDIAN VILLA  
 MADONNA COLONY, BORIVLI (W)  
 MUMBAI  
 MAHARASHTRA -400103**

विहित फीस के संद्वार पर और आवश्यक घोषणा करने पर एक जीवन बीमाकर्ता का बीमा कारबार उपाप्त करने या उसके लिए आग्रह करने के लिए 9/6/2009 से तीन वर्ष के लिए बीमा अभिकर्ता का कार्य करने के लिए प्राधिकृत है।  
 Having paid the prescribed fee and having made the necessary declaration is hereby authorized to act an insurance agent for three years from 9/6/2009 for procuring or soliciting insurance business of one Life Insurer.

स्थान Place: Hyderabad

दिनांक Date: 17/4/2009

कृते बीमा विनियामक और विकास प्राधिकरण  
 for Insurance Regulatory and Development Authority

अनुज्ञापितधारक के हस्ताक्षर Signature of Licence Holder

अध्यक्ष Chairperson  
 Designated Person

यह अनुज्ञापन तब तक विधिवान्वय नहीं होगी जब तक बीमा विनियामक और विकास प्राधिकरण के अध्यक्ष के हस्ताक्षर की अनुमति और इस निमित्त उसके द्वारा प्राधिकृत व्यक्ति के आदेश पर अनुज्ञापितधारी के हस्ताक्षर और पहचान-पत्र उस पर न हों। अनुज्ञापितधारी को अनुज्ञापन के प्राप्त होते ही उस पर हस्ताक्षर करने चाहिये।

This licence is not valid unless it bears a facsimile of the signatures of the Chairperson of the Insurance Regulatory and Development Authority and the initials of a person authorized by him in this behalf, the signature of the licence holder and the identity card(s). The licence holder should put his signature as soon as licence is received.

**टिप्पण Notes**

- यदि इस अनुज्ञापन का अतिरिक्त अवधि के लिए नवीकृत करने की वांछ है तो बीमा विनियामक और विकास प्राधिकरण (बीमा अभिकर्ता अनुज्ञापन) विनियम, 2000 के विनियमन 3 में अधिकृत प्रक्रिया का अनुसरण किया जाएगा और नवीकरण के लिए आवेदन अनुज्ञापन की समाप्ति के पूर्व अधिष्ठित व्यक्ति के पास पहुँचा जाना चाहिये। इस संबंध में अधिका ध्यान बीमा अधिनियम, 1938 की धारा 42 की धारा (3) और (3क) के उपबन्धों की ओर भी आकृष्ट किया जाता है।
- If it is desired to renew this licence for a further period the procedure laid down in Regulation 3 of INSURANCE REGULATORY AND DEVELOPMENT AUTHORITY (LICENSING OF INSURANCE AGENTS) REGULATIONS, 2000, shall be followed, and application for renewal should reach the Designated Person before the licence expires. In this connection attention is also invited to the provisions of sub-sections (3) and (3A) of section 42 of the Insurance Act, 1938.

अनुज्ञापन के अधीन विनियमित बीमा कारबार के लिए अभिकर्ता के रूप में कार्य करने के लिए अनुज्ञापितधारी को प्राधिकृत करती है, और इस लिए कोई भी पहचान करने वाला चिह्न या किसी ऐसे व्यक्ति के किसी उत्पन्न का परिणाम अनुज्ञापन का रद्द करना होगा।  
 This licensee authorises the licence holder to act as an agent for the insurance business specified thereunder, and therefore no identifying mark or note of any description by which the identity of an Insurer might be established should be placed on the licence.

इस अनुज्ञापन पर कोई भी चिह्न बिना अनुज्ञापन के अध्यक्ष या उसके द्वारा इस निमित्त प्राधिकृत व्यक्ति के उस पर आग्रह न हों।  
 In connection with this licence no mark or note of any description should be placed on the licence unless it is authorised by the Insurance Regulatory and Development Authority or a person authorised by him in this behalf.

- अनुज्ञापन के अधीन बीमा विनियामक और विकास प्राधिकरण (बीमा अभिकर्ता अनुज्ञापन) विनियम, 2000 के विनियम 8 के अधीन विनियमित आचार संहिता की ओर आकृष्ट किया जाता है, और आचार-संहिता के किसी उल्लंघन का परिणाम अनुज्ञापन का रद्द करना होगा।
- The attention of the licence holder is drawn to the code of conduct specified under Regulation 8 of INSURANCE REGULATORY AND DEVELOPMENT AUTHORITY (LICENSING OF INSURANCE AGENTS) REGULATIONS, 2000, and any violation of code of conduct may result in cancellation of licence.



स्थायी पता 9 REMEDIAN VILLA  
 Permanent Address  
MADONNA COLONY BORNALI (W)  
BOMBAY-400 103

टेलीफोन नम्बर  
 Telephone No.  
P.O. Box 3166  
QATAR

टेलीफोन नम्बर  
 Telephone No.  
854444

एन पासपोर्ट में शामिल किए गए व्यक्तियों का विवरण  
 Particulars of children included in this passport

| नाम<br>Name | जन्म की तारीख<br>Date of Birth | लिंग / लिंग<br>Male / Female |
|-------------|--------------------------------|------------------------------|
| 1)          |                                |                              |
| 2)          |                                |                              |
| 3)          |                                |                              |
| 4)          |                                |                              |

NIL

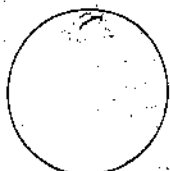
इस पासपोर्ट में 36 पृष्ठ हैं।  
 This passport contains 36 pages.

1) यह पासपोर्ट सभी देशों की यात्रा के लिए वैध है।  
 THIS PASSPORT IS VALID FOR TRAVEL TO ALL COUNTRIES.

2) यदि अवधि न बढ़ाई जाए तो  
 इस पासपोर्ट की वैधता 18.03.1998(F)  
 Unless renewed validity of this passport expires on : की समाप्ति हो जाएगी।

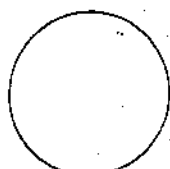
3) संख्या \_\_\_\_\_ तारीख \_\_\_\_\_  
 No. \_\_\_\_\_ Date \_\_\_\_\_

इस पासपोर्ट की वैधता  
 Validity of this passport is extended up to तक बढ़ाई गई है।



4) संख्या \_\_\_\_\_ तारीख \_\_\_\_\_  
 No. \_\_\_\_\_ Date \_\_\_\_\_

इस पासपोर्ट की वैधता  
 Validity of this passport is extended up to तक बढ़ाई गई है।



EX/6 222 240

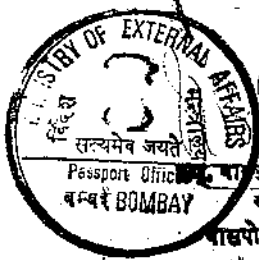




इसके द्वारा, भारत गणराज्य के राष्ट्रपति के नाम पर, उन सभी जिनका इस बात से स्तोकार हो, यह प्रार्थना एवं अपेक्षा की जाती है कि वे बाहक को बिना रोक-टोक, आजादी से आने-जाने दें, और जो तरह की ऐसी सहायता और सुरक्षा प्रदान करें जिसकी उसे आवश्यकता हो।

These are to request and require in the Name of the President of the Republic of India, all those whom it may concern, to allow the bearer to pass freely without any hindrance, and to afford him or her every assistance and protection of which he or she may stand in need.

Given at Bombay  
29th MARCH 88  
 को दिया गया



भारत गणराज्य के राष्ट्रपति के आदेश से दिया गया  
 BY ORDER OF THE PRESIDENT OF THE REPUBLIC OF INDIA

पासपोर्ट कार्यालय N. Balesubramanian  
 अधिकारी Superintendent  
 पासपोर्ट कार्यालय Passport Office  
BOMBAY

पासपोर्ट  
 PASSPORT  
 भारत  
 INDIA

627163

नाम GERARD D'ABREO  
 NAME

ACCOMPANIED BY CHILDREN WHOSE PARTICULARS ARE MENTIONED BELOW.

नाम NAME जन्म की तारीख DATE OF BIRTH लिंग SEX  
 MALE/FEMALE

राष्ट्रियता  
 NATIONAL STATUS

भारत का नागरिक  
 CITIZEN OF INDIA  
 इस पासपोर्ट में 36 पृष्ठ हैं।  
 This Passport contains 36 pages.

विवरण/DESCRIPTION  
 लिंग MALE व्यवसाय PRIVATE SERVICE  
 Sex Profession  
 अविवास INDIA ऊँचाई 1.59 मी. सी.  
 Domicile Height CMS.  
 रंग BLACK आँखों का रंग BLACK बालों का रंग  
 Colour of eyes of hair

पिता/पति का नाम ALFRED THOMAS D'ABREO  
 Name of father/husband

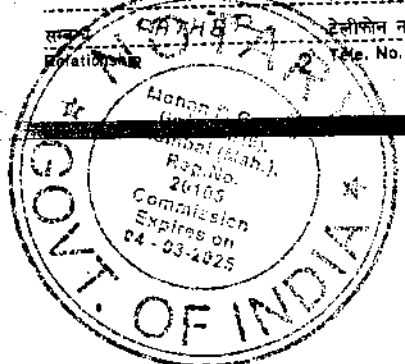
स्थायी पता REMEDIAN VILLA PLATINUM  
 Permanent Address MADONNA COLONY  
BORIVLI (W) BOMBAY 400003

मुख्य अथवा दुर्घटना की स्थिति में जिस सम्बन्धी अथवा मित्र को सूचना देनी हो उसका विवरण।  
 Particulars of relative/friend to be intimated in event of death or accident.

नाम ALFRED THOMAS D'ABREO  
 Name

पता AS ABOVE  
 Address

संज्ञा Passport टेलीफोन नम्बर None  
 Identification No. Tel. No.



INDIA गणराज्य के राष्ट्रपति के आदेश से दिया गया  
 BY ORDER OF THE PRESIDENT OF THE REPUBLIC OF INDIA

पासपोर्ट कार्यालय N. Balesubramanian  
 अधिकारी Superintendent  
 पासपोर्ट कार्यालय Passport Office  
BOMBAY



|              |     |
|--------------|-----|
| पत्रिका - 61 |     |
| EX 100       | 240 |

Name of holder: ALFRED THOMAS

Name of holder: BERNICE D'ABREO

Name of holder: TONA OLGA

Name of holder: SEAR NEARLETT

Visible description of the holder: EYE



Place of birth: BOMBAY, M.S.  
 Date of birth: 28.07.19  
 Sex: MALE  
 Religion: CHRISTIAN  
 Occupation: GOVT. CLERK



PP-88889/94 **REGISTERED**

पंजीकरण

विदेशों में रहने वाले भारतीय नागरिकों को तत्काल ही इसकी सूचना देनी चाहिए कि वे अपने को निकटतम भारतीय मिशन/कंसलेट या एम्बेसी में पंजीकृत करवा दें।

चेतावनी

यह पासपोर्ट भारत सरकार की सम्पत्ति है। पासपोर्ट अधिकारी से इस पासपोर्ट के संदर्भ में कोई सूचना मिलने पर तुरंत इसे सौंप कर दिया जाना चाहिए, तत्काल दुरुस्त करवाया जाना चाहिए।

यह पासपोर्ट भारत सरकार की सम्पत्ति है। यह पासपोर्ट भारत या उसके द्वारा प्रविष्टि के उद्देश्य से ही जारी किया गया है। इसमें किसी भी प्रकार के फेरबदल या भिन्नता नहीं किया जाना चाहिए।

पासपोर्ट गुप्त बाल, छोटी हो या बच्चे को लाने के उद्देश्य से जारी किया गया हो, तब भी निकटतम भारतीय मिशन/कंसलेट या एम्बेसी में पंजीकृत करवा दिया जाना चाहिए।

REGISTRATION

INDIAN CITIZENS RESIDENT ABROAD ARE ADVISED TO REGISTER THEMSELVES AT THE NEAREST INDIAN MISSION/POST.

CAUTION

THIS PASSPORT IS THE PROPERTY OF THE GOVERNMENT OF INDIA. ANY COMMUNICATION RECEIVED BY HOLDER FROM THE PASSPORT AUTHORITY REGARDING THIS PASSPORT, INCLUDING DEMAND FOR ITS SURRENDER, SHOULD BE COMPLIED WITH IMMEDIATELY. PASSPORT SHOULD NOT BE SENT OUT OF ANY COUNTRY BY POST. IT SHOULD BE IN THE CUSTODY EITHER OF THE HOLDER OR OF A PERSON AUTHORIZED BY THE HOLDER. IT MUST NOT BE ALTERED OR MUTILATED IN ANY WAY.

LOSS, THEFT OR DESTRUCTION OF PASSPORTS SHOULD BE IMMEDIATELY REPORTED TO THE NEAREST PASSPORT AUTHORITY IN INDIA OR (IF THE HOLDER IS ABROAD) TO THE NEAREST INDIAN MISSION AND TO THE LOCAL POLICE. ONLY AFTER EXHAUSTIVE ENQUIRIES SHALL A REPLACEMENT PASSPORT BE ISSUED.

Minister of External Affairs  
 Secretary  
 Deputy Secretary

REPUBLIC OF INDIA  
 BY ORDER OF THE PRESIDENT OF THE



THESE ARE TO BE USED FOR THE PURPOSES OF THE PRESIDENT OF THE REPUBLIC OF INDIA. THE PRESIDENT OF THE REPUBLIC OF INDIA HAS THE HONOUR TO REQUEST AND REQUEST IN THE NAME OF THE PRESIDENT OF THE REPUBLIC OF INDIA TO ALLOW THE BEARER OF THIS PASSPORT TO ENTER THE TERRITORY OF THE REPUBLIC OF INDIA FOR THE PURPOSES OF THE PRESIDENT OF THE REPUBLIC OF INDIA. THE PRESIDENT OF THE REPUBLIC OF INDIA HAS THE HONOUR TO REQUEST AND REQUEST IN THE NAME OF THE PRESIDENT OF THE REPUBLIC OF INDIA TO ALLOW THE BEARER OF THIS PASSPORT TO ENTER THE TERRITORY OF THE REPUBLIC OF INDIA FOR THE PURPOSES OF THE PRESIDENT OF THE REPUBLIC OF INDIA.



|                                                                                                                                 |                                                                                                                                                                                                                                                                   |                                                                                     |
|---------------------------------------------------------------------------------------------------------------------------------|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------------------------------------------------------|
| फोटो<br>                                       | अभिकर्ता का अनुमति सं.<br>Agent's Licence No<br>अभिकर्ता का नाम<br>Name of the Agent<br>पिता / पति का नाम<br>Father's/Husband's Name<br>इस बीमाकर्ता का कार्यालय, जिसके साथ<br>अभिकर्ता संलग्न है।<br>Office of the Insurer<br>with whom the agent<br>is attached | 010 1154635<br>GERARD DABREO<br>ALFRED<br>LIFE INSURANCE<br>CORPORATION OF<br>INDIA |
| अभिकर्ता के हस्ताक्षर<br>Agent's Sign.                                                                                          | इस पहचान पत्र का धारक हमारे नियमों और शर्तों के अनुसार हमारे बीमा उत्पादों को<br>विक्रय करने के लिए प्राधिकृत है।<br>The holder of this card is authorised to sell our<br>insurance products, as per our terms and conditions.                                    |                                                                                     |
| पुरुष Male<br>को जारी<br>Issued on:<br>17/4/2009<br>तक वैधता<br>Valid upto:<br>8/6/2012<br>को जन्म हुआ<br>Born on:<br>22/7/1967 | हस्ताक्षर<br>Signature of<br>बीमाकर्ता का नाम (मुद्रा सहित)<br>Name of Insurer (with Seal)<br><br>कृपया पृष्ठ भाग पर देखें<br>(Please see on the reverse)                       |                                                                                     |

चरल - 61

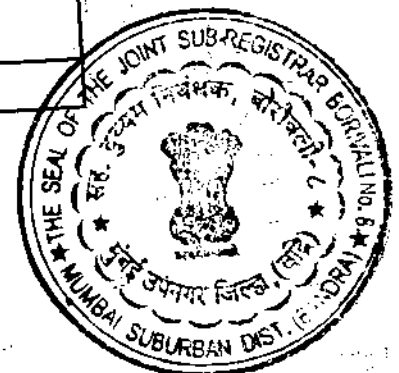
|       |     |     |
|-------|-----|-----|
| exllo | 920 | 240 |
| 2022  |     |     |

बीमाकर्ता का पता और टेलीफोन संख्याएं: (यदि इस पहचान पत्र के धारक के संबंध में किसी व्यक्ति द्वारा संपर्क करना  
 आवश्यक है)  
 Address and telephone numbers of the Insurer: (If required to be  
 contacted by any one in connection with the holder of this card):

|       |          |   |
|-------|----------|---|
| पता   | ADDRESS  | : |
| शहर   | CITY     | : |
| जिला  | DISTRICT | : |
| राज्य | STATE    | : |

अभिकर्ता का पता और टेलीफोन संख्याएं  
 Address and telephone numbers of the Agent:

|          |          |   |                         |
|----------|----------|---|-------------------------|
| मकान सं. | HOUSE NO | : | FLAT NO. 9, 2ND FLOOR   |
| गली      | STREET   | : | REMEDIAN VILLA          |
| शहर      | TOWN     | : | MADONNA COLONY, BORIVLI |
|          |          | : | (W)                     |
| राज्य    | STATE    | : | MAHARASHTRA -400103     |
| दूरभाष   | PHONE    | : | 022-                    |



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|         |     |     |
|---------|-----|-----|
| - 61    |     |     |
| 986     | 986 | 240 |
| 0018885 |     |     |

बृहन्मुंबई महानगरपालिका  
MUNICIPAL CORPORATION OF GREATER MUMBAI  
सार्वजनिक आरोग्यखाते  
Public Health Department  
नमुना क्र. १० FORM NO.10

PH - 52

(महाराष्ट्र जन्म-मृत्यु नोंदणी नियमावली, १९७६, नियम ९ कृपया पहावा)  
(See Rule 9 of the Maharashtra Registration of Births & Deaths Rules, 1976)

मृत्यु नोंदणी प्रमाणपत्र  
CERTIFICATE OF DEATH

जन्म-मृत्यु नोंदणी अधिनियम १९६९, कलम १२/१७ च्या अंतर्गत  
Issued under section 12/17 of the Registration of Births and Deaths Acts, 1969.

असा दाखला देण्यात येतो की, खाली नमूद केलेली माहिती बृहन्मुंबई महानगर पालिकेच्या पुस्तकातून घेतलेली आहे.

विभागाच्या मूळ

This is to certify that the following information has been taken from the original record of Death which is in register for **RN** ward of Municipal Corporation of Greater Mumbai.

नाव

Name

ALFRED THOMAS D'ABREO

राष्ट्रीयत्व

Nationality

INDIAN

लिंग

Sex MALE

कायमच्या वास्तव्याचा पत्ता

Permanent Address

9 VILLA REMEDIAN MEDONA COLONY  
BORIVALI W  
MUMBAI

मृत्यु दिनांक

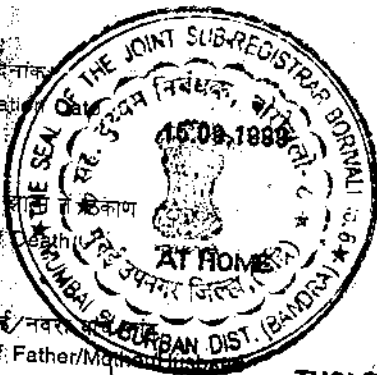
Date of Death

13.08.1989

460103

नोंदणीपुस्तक अ.क्र.  
Registration No.

3452

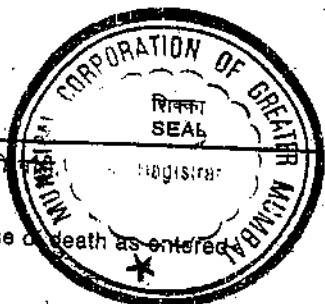
नोंदणी दिनांक  
Registrationजेथे मृत्यु झाले ते ठिकाण  
Place of Deathवडिल/आई/नवरा  
Name of Father/Mother

THOMAS D'ABREO

DR R. J. THAKKAR  
M.B.B.S. (Mum.)

दाखला देणारा अधिकारी  
Signature of the Issuing Officer  
Sub-Registrar, Greater Mumbai

सुचन १३ (१) च्या तरतुदी पहावी.  
Note - In the case of death, no disclosure shall be made of particulars regarding the cause of death as entered in the register. See provision to Sub-section 17 (1).



131  
126

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मौक



गोंय सरकार  
GOVERNMENT OF GOA

नमुना-६  
Form - 6

OFFICE OF THE VILLAGE PANCHAYAT CALANGUTE - GOA

मृत्यु प्रमाणपत्र  
DEATH CERTIFICATE



(जन्म आनी मृत्यु नोंदणी अधिनियम, १९६९ च्या कलम १२/१७ आनी गोंय जन्म आनी मृत्यु नोंदणी (दुरुस्ती) नेम, २००७ च्या नेम ८/१३ खाला जारी केला)  
(Issued under Section 12/17 of the Registration of Births and Deaths Act, 1969 and Rule 8/13 of the Goa Registration of Birth and Deaths (Amendment) Rules, 2007.)

प्रमाणित करता की सकयल दिल्ली माहिती ही मृत्यूच्या मुळ लेखातल्यान घेतल्या जी गोंय राज्याच्या North Goa जिल्ह्याच्या Bardez तहसील/तालुक्याच्या Calangute (थळाव्या बाजार/थळाव्या संस्थेत) रजिस्ट्रात नोंद आसा.

is to certify that the following information has been taken from the original record of death which is in the register for local area/local body) Calangute of tahsil/block Bardez of District North Goa of State Goa.

व / Name : MRS BERNICE D'ABREO लिंग / Sex : FEMALE

यिल्ल्या मनशाचो युआईडी नं / UID No. of deceased : X X X X X X X X X X X X X X

तारीख / Date of Death : 04/02/2019 ( Four -February - Two Thousand Ninteen )

ठिकाण / Place of Death : H NO 1-88/G-8 GAURA VADDO CALANGUTE

चे नांव / Name of Mother : LUCY FERNANDES

युआईडी नं / UID No. of Mother : X X X X X X X X X X X X X X

व / Name of Father : MR RAPHAEL FERNANDES

युआईडी नं / UID No. of Father : X X X X X X X X X X X X X X

रावे / बायलेचे नांव : ALFRED D'ABREO

UID of Husband / Wife : X X X X X X X X X X X X X X

वधेचे वर्सा / Age of \*widow : 0

वधेचे पत्तो / Address of \*widow :

आयिल्ल्या मनशाचो मृत्यु वेळार आशिल्लो पत्तो पत्तो  
Address of the deceased at the time of death  
H NO 1-88/G-8, GAURA VADDO CALANGUTE GOA 403516  
मर्ण आयिल्ल्या मनशाचो कायमचो पत्तो  
Permanent address of the deceased  
H NO 1-88/G-8 GAURA VADDO CALANGUTE GOA 403516

क्रमांक / Registration No. : D/8/2019 नोंदणी तारीख / Date of Registration : 04/02/2019

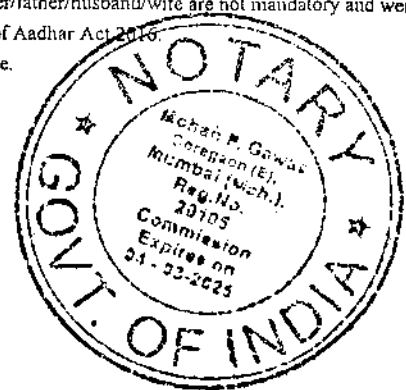
सल्लोय आसल्यार) Remarks (if any) :  
रपाची तारीख / Date of issue : 01/03/2019

यकान्याची सय/Signature of the issuing authority

यकान्याचो पत्तो /Address of the issuing authority

"Ensure registration of every birth and death / प्रत्येक जन्म वा मृत्यूची नोंदणी केल्या हाची खात्री करात"  
मृत्यूच्या बाबतीत, रजिस्ट्रात नोंद केल्याप्रमाण मर्णाच्या कारणासंबंधी कसलीच माहिती उक्ती करपाक जायना उप-कलम १७(१) चो परतक पळ्यात  
In case of death, no disclosure shall be made of particulars regarding the cause of death as entered in the Register. See proviso to sub-section 17(1).

(All the entries should be in ENGLISH Only)/ सगळ्यो नोंदी फक्त इंग्लिशितल्यानच करच्यो)  
(1) Information as to 'Permanent Address' and 'Present Address' reflected above were not recorded prior to 30-05-2008.  
(2) Information as to name of husband/wife was not recorded prior to 2015.  
(3) Information as to the UID No. of deceased/mother/father/husband/wife are not mandatory and were not recorded prior to 2015.  
(4) Aadhar/UID No. not displayed as per provision of Aadhar Act 2016.  
(5) \* To be filled only if the deceased is married male.



132

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| 132 | 127 | 0018885 |
| EXU | 930 | 240     |

बृहन्मुंबई महानगरपालिका  
MUNICIPAL CORPORATION OF GREATER MUMBAI  
सार्वजनिक आरोग्यखाते  
Public Health Department  
नमुना क्र. १० FORM NO.10

PH - 52

(महाराष्ट्र जन्म-मृत्यु नोंदणी नियमावली, १९७६, नियम ९ कृपया पहावा)  
(See Rule 9 of the Maharashtra Registration of Births & Deaths Rules, 1976)

मृत्यु नोंदणी प्रमाणपत्र  
CERTIFICATE OF DEATH

जन्म-मृत्यु नोंदणी अधिनियम १९६९, कलम १२/१७ च्या अनुरोधाने  
Issued under section 12/17 of the Registration of Births and Deaths Acts, 1969.

असा दाखला देण्यात येतो की, खाली नमूद केलेली माहिती बृहन्मुंबई महानगर पालिकेच्या विभागाच्या मूळ पुस्तकातून घेतलेली आहे.  
This is to certify that the following information has been taken from the original record of Death which is in register for **RN** ward of Municipal Corporation of Greater Mumbai.

नाव  
Name **ALFRED THOMAS D'ABREO**

राष्ट्रीयत्व  
Nationality **INDIAN**

लिंग  
Sex **MALE**

कायमच्या वास्तव्याचा पत्ता  
Permanent Address **9 VILLA REMEDIAN MEDONA COLONY  
BORNALI W  
MUMBAI 400103**

मृत्यु दिनांक  
Date of Death **13.08.1999**

नोंदणीपुस्तक अ.क्र.  
Registration No. **3452**

नोंदणी दिनांक  
Registration Date **15.08.1999**

जेथे मृत्यु झाला ते ठिकाण  
Place of Death **AT HOME**

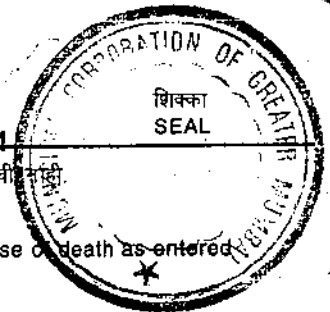
वडिल/आई/नवरा यांचे नांव  
Name of Father/Mother/Husband **THOMAS D'ABREO**

**DR. R. J. THAKKAR**  
M.B.B.S. (Mum.)

दाखला देणारा अधिकारी  
Signature of the issuing Authority  
Sub-Registrar

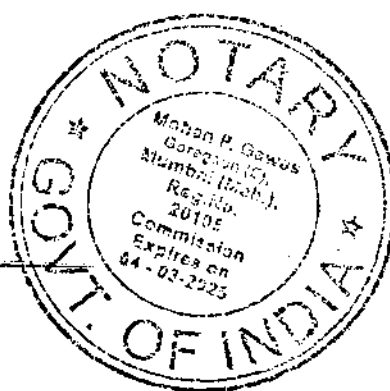
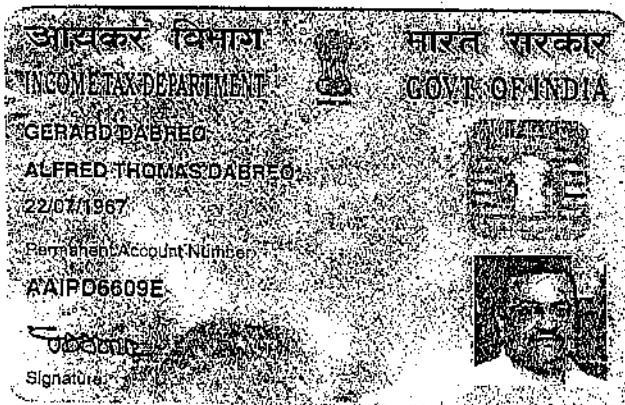
दिनांक  
Date **13.08.2001**

सुचना: मृत्यु नोंदणी अधिनियम १९६९ च्या कलम १७ (१) च्या तरतुद पहावी.  
Note: In the case of death, no disclosure shall be made of particulars regarding the cause of death as entered in the register. See provision to Sub-section 17 (1).



133  
128

|         |     |     |
|---------|-----|-----|
| बल - ८१ |     |     |
| EXCC    | 399 | 270 |
| २०२२    |     |     |



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129

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| वर्ष - 21 |     |     |
| EXC6      | 942 | 240 |
| 2022      |     |     |

भारत सरकार  
उपराज्यपाल  
Gerard Dabreo

जन्म वर्ष / Year of Birth : 1987  
पुल्ल / Male

6185 7893 3298

आधार - सामान्य भाषासाचा अधिकार

*Handwritten signature*

बैंक अथवा हस्ताक्षरकर्ता जम्बोवरी की ओर से किसी लिखितपत्र के बिना हम पुष्टि करते हैं कि यह हस्ताक्षर हमारे पास उपलब्ध नमूना हस्ताक्षर से मिलते हैं।  
WITHOUT ANY RESPONSIBILITY ON THE PART OF BANK OR THE SIGNING OFFICIAL WE CONFIRM THAT THIS SIGNATURE AGREES WITH SPECIMEN HELD IN OUR FILE.

कृते आईडीबीआई बैंक लिमिटेड  
बोरोवली (प) शाखा / Borivali (P) Branch, I.D.B.I. Bank Limited.

प्रमाणित हस्ताक्षरकर्ता / Authorized Signatory

19/08/2022

भारतीय न्यायिक प्रमाणिकरण  
INDIAN JUDICIAL AUTHENTICATION OF INDIA

पता : S/O कल्पेड, आर.वी.आय.  
कोर्टस बचक, ए-३०१ न्यू हेरिटेज  
को.डी.सी. कोंडरपडा, दहिसर, मुंबई, महाराष्ट्र, 400068

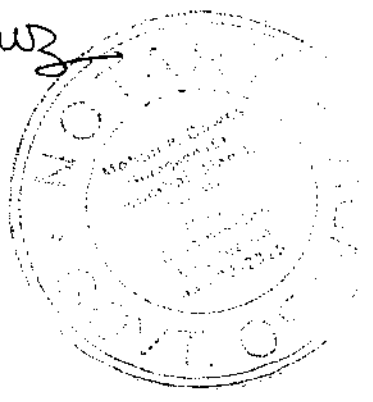
Address: S/O Alfred, near RBI  
quarters, A-301 new heritage  
CHS kanderpada, Dahisar,  
Dahisar, Mumbai, Maharashtra,  
400068

1847  
1800 188 1847

help@idai.gov.in

www.idai.gov.in

P.O. Box No. 1847,  
Bangalore-560 001



139

Flat No: 10

**MRS. D. M. GILBERTA VARELLA**

OWNER OF VILLA REMEDIAN

14, VILLA REMEDIAN, MADONNA COLONY, BORIVALI (W), MUMBAI 400 103

|          |     |     |
|----------|-----|-----|
| बिल - 61 |     |     |
| exllo    | 392 | 240 |
| २०२२     |     |     |

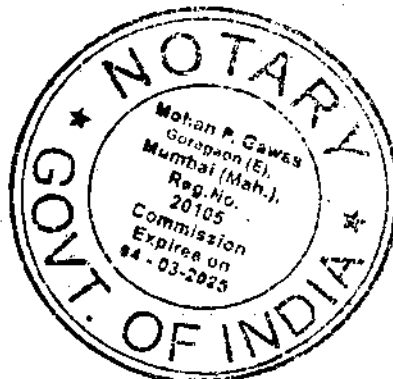
Bill No.: 010Date: 28 OCT 2020Tenant's Name: Mrs. Mary Anthony2<sup>nd</sup> Floor, Flat No: 10Rent of the above flat occupied by you Rs: 900/- per month, including taxes& service charges for/from the month of 01 MAR 2020 UNTIL 31 DEC 2020Total Rs: 9,000/-In words Rs. Nine thousand only

Signature

[Signature]

LEGAL HEIR

Date received



136

127

|       |     |     |
|-------|-----|-----|
| ex 66 | 348 | 240 |
|-------|-----|-----|

Smt. Maria Ditosa Gilberta Varella

OWNER OF VILLA REMEDIAN

Plot No. 9, Madonna Colony, BORIVLI (West), Bombay-92.

Bill No. 32

Borivli S-10-1967

Tenant's Name Mrs. Mary Anthony2nd Floor Block No. 10

Rent of the above mentioned place occupied by you as monthly tenant subject to the terms on reverse hereof and agreed by you Rs one hundred per month including taxes for the month of September, 1967

Rent Rs. 100/-Signature M. Varella

Date \_\_\_\_\_



# महाराष्ट्र बॉम्बे सबर्बन इलेक्ट्रिक सप्लाय लिमिटेड

इलेक्ट्रिसिटी हाऊस, पत्रपेटी क्रमांक ६८०८,  
सांताक्रुझ (पूर्व), मुंबई ४०० ०५५.

दुरध्वनी क्रमांक ६१२ २२५०



| बिलाची तारीख | बिलाचा महिना | ग्राहक क्रमांक | सायकल | बुक. | डिलिव्हरी बुक |
|--------------|--------------|----------------|-------|------|---------------|
| 18-07-87     | JUN-87       | K13980971      | 14    | 34A  | 23            |

MARY A. CHAKKALAKAL,  
VILLA REMEDIAN, FLAT 10,  
MADONNA COLONY, S.P. ROAD,  
BORIVLI, BOMBAY 92.

पत्रव्यवहार कालाना कृपया-

ग्राहक क्रमांक, सायकल व बुक क्रमांकाचा उल्लेख करावा

| दर        | मीटर क्रमांक       | विद्यमान<br>रीडिंग | वापरलेले<br>युनिट | मीटर भाडे<br>रु. | वीज आकार<br>रु. |
|-----------|--------------------|--------------------|-------------------|------------------|-----------------|
| LF1<br>F1 | 0266357<br>0456247 | 9730<br>8199       | 116<br>68         | 100              | 123.88          |

नोटीस:

या बिलात दाखवलेली निव्वळ बाकी  
रक्कम रु. 77.73  
आपण अक्षप भरलेली नाही हे बिल मिळाल्यापासून सात  
दिवसात वरिल बाकी रक्कम न पडल्यास आपला वीज पुरवठा  
इंडियन इलेक्ट्रिसिटी अॅक्ट १९१०, सेक्शन २४(१) च्या अन्वये  
खंडित केला जाईल त्यानंतर सर्व रक्कम व रु. ३/- पुनर्जोडणी  
आकार भरल्यानंतरच वीज पुरवठा पुन्हा चालू करण्यात येईल.  
या नोटिसोमुळे पूर्वीची नोटीस रद्द होत नाही.

\* 'वीज आकार' स्तंभ ६ मध्ये हो रक्कम 'किमान आकार' या अर्थी आहे.

|                                                                |                             |               |                             |                                    |                                        |                                                        |  |
|----------------------------------------------------------------|-----------------------------|---------------|-----------------------------|------------------------------------|----------------------------------------|--------------------------------------------------------|--|
| * 'बीज आकार' स्तंभ ६ मध्ये ही रक्कम 'किमान आकार' या अर्धी आहे. |                             |               |                             |                                    |                                        |                                                        |  |
| इंधन<br>समायोजन दर<br>पैसे/युनिट                               | इंधन<br>समायोजन आकार<br>रु. | इतर **<br>रु. | सरकारी<br>विद्युत कर<br>रु. | एकूण आकार<br>(स्तंभ ५ ते ९)<br>रु. | अदाजित बिलाची<br>रक्कम वज<br>(जमा) रु. | चालू महिन्याच्या<br>बिलाची रक्कम (अ)<br>(स्तंभ १०-११). |  |
| 4.600                                                          | 00                          | -853          | 1812                        | 139.47                             | 79.78                                  | 59.69                                                  |  |
| अंदाजित/रद्द                                                   |                             |               |                             |                                    | निव्वळ बाकी (ब)                        | (अन्व)<br>एकूण बिलाची रक्कम                            |  |
| भागील बिलाची<br>एकूण रक्कम<br>रु.                              | जमा रक्कम<br>रु.            | कोड           | रक्कम<br>रु.                | रु.                                | रु.                                    | रु.                                                    |  |
| 23673                                                          | 15900                       |               | 00                          |                                    | 77.73                                  | 137.42                                                 |  |
|                                                                |                             |               |                             |                                    | या तारखेपूर्वी                         | पूर्णिक देय                                            |  |

हे बिल अधिकृत भरणा केंद्रातच भरावे.

घनदेश (चेक) देऊन भरणे केलेल्या रकमेची पावती घनदेश वटल्यावरच  
अधिकृत समजली जाईल.

आपण बिलाची रक्कम 11-07-87 या तारखेनंतर भरली  
असल्यास निव्वळ देय रक्कम स्विकारण्यासाठी आपली पावती दाखवावी.

CR = जमा

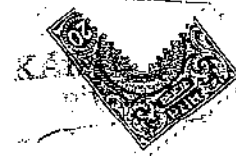
बुकपुल घावी घ्यावी

व्यवस्थापकीय संचालक

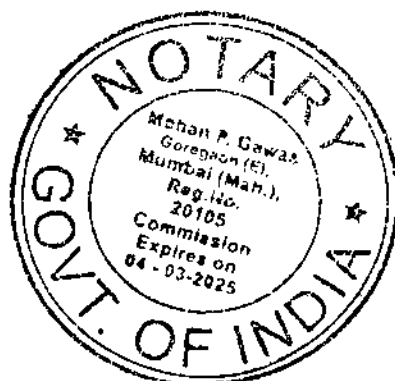
महत्वाचा संदेश: (सविस्तर टीपाच्या) माहितीसाठी मागे पहावे)

NOTE-2 METER HAS BEEN READ ON 10-07-87. CONSUMPTION IS FOR  
2 MONTHS. PREVIOUS ASSESSED BILL HAS BEEN ADJUSTED.  
\*\*INTEREST ON SECURITY DEPOSIT FOR THE YEAR ENDED 31/03/87

RECEIVED BY CHDQUR



(स्थळप्रत फक्त बी.एस.ई.एस.सक. जागृताळिका)





The power of service

सुचक्राग्रह  
स्वच्छता का सन्देश



Scan code to pay your bill via UPI  
Use any Bank/ UPI App

**adani**  
Electricity

CUSTOMER CARE CENTRE / CORRESPONDENCE ADDRESS  
/ INTERNAL GRIEVANCE REDRESSAL CELL (IGRC)

Jn. of Shankar Lane B S V Road, Kandivall (West).  
Mumbai 400 067

www.adanelectricity.com  
helpdesk.mumbalelectricity@adani.com

Join us on



**24x7 Powerline**  
**19122** We're listening.

For power  
interruption,  
complaint or  
restoration  
status

SMS POWER <9 digit account no.> to  
7065313030 from any mobile no.

Give us a missed call on 1800 532 9998  
from your registered mobile no.

Whatsapp POWER <9 digit account no.>  
to 9594519122 from any mobile number.

Bill No. 100549183247  
Bill Distribution No.  
NORTH/N22-BORIVILI (W)/13/218/217/017/011

Bill Date 05-10-2020

Type of Supply SINGLE PHASE  
Cycle No. 13

## YOUR CURRENT CONSUMPTION

| YOUR CURRENT CONSUMPTION |              |                          | Energy consumption |                  | Consumption | Energy     | Fixed      |
|--------------------------|--------------|--------------------------|--------------------|------------------|-------------|------------|------------|
| Tariff                   | Meter number | Multiplying Factor (M.F) | Present reading    | Previous reading | (Unit kWh)  | charge (₹) | charge (₹) |
| LT I (B)                 | 8812239      | 1                        | 6826.00            | 6704.00          | 124.00      | 406.40     | 110.00     |
| TOTAL                    |              |                          |                    |                  | 124.00      | 406.40     | 110.00     |

## TRACK YOUR CONSUMPTION (UNITS)

| Billing Month | Last year |          | This year |          |
|---------------|-----------|----------|-----------|----------|
|               | Units     | Amount ₹ | Units     | Amount ₹ |
| SEP           | 197       | 1708     | 124       | 857      |
| Aug           | 193       | 1668     | 230       | 1674     |
| Jul           | 220       | 1939     | 216       | 1556     |
| Jun           | 238       | 2120     | 223       | 1620     |
| May           | 194       | 1678     | 223       | 1620     |
| Apr           | 204       | 1778     | 223       | 1620     |

Refer Important Message Section

**IMPORTANT MESSAGE**

Tentative meter reading date for your Oct-20 bill is 30-10-2020

**BILL OF SUPPLY** **RESIDENTIAL**

MARY A CHAKKALAKAL  
VILLA-REMEDIAN-FLAT 10  
MADONNA COLONY S P ROAD  
BORIVILI  
MUMBAI-400092  
Mobile No. 84\*\*\*\*\*02  
Email Id al\*xa@patel-india.com  
Connected Load in kW 1.19

To update your email id and mobile no., call us on 19122



ACCOUNT NO.  
101784214



BILL MONTH  
Sep-20



DUE DATE\*  
26-10-2020

**Electric Smiles**

SMILES EARNED  
1390

**DUE AMOUNT**

**₹860.00\***

THIS  
MONSOON,  
BE SAFE.

Be it distancing from electric poles or replacing damaged electrical components - kindly do your bit to make it a safe monsoon.

## DISCOUNTED BILL AMOUNT

Round sum bill payable (after discount of ₹7.11) on or before discount date 12-10-2020 **₹850.00**

## LATE PAYMENT BILL AMOUNT

Round sum bill payable (including DPC of ₹ 10.71) after due date 26-10-2020 **₹ 870.00\***

\*Refers only to current bill amount.  
Previous balance is payable immediately.  
\*Payable until one month after due date, thereafter interest applicable as per MSRD credit order.  
\*1 Electric Smile equals 1 reward point credited to your account.

*Sajimon Nanod*

SAJIMON NANOD  
Commercial Management Head  
(North Division)

**360 DEGREE  
ADVERTISING SOLUTIONS  
FOR YOUR BRANDS**



Exclusive Sole Marketing Rights of Adani Electricity Bill

**SCOM**  
Media

AIRLINE MEDIA | PERSONAL MEDIA | OUTDOOR MEDIA  
CREATIVE STRATEGY | DIGITAL MARKETING

To Advertise here, Email: marketing@scommedia.com • www.scommedia.com

f /scommediapvtltd @ /scommedia

If paying by cheque, please remember:

- Cheque should be Account Payee of local clearing and not post-dated
- Always attach payment slip. Do not staple.
- Mention A/C No. and respective amount on back of the cheque when making multiple bill payments by single cheque.
- Make cheque payable to Adani Electricity Mumbai Ltd. A/C No. : 101784214

DIV04/A01/218/217

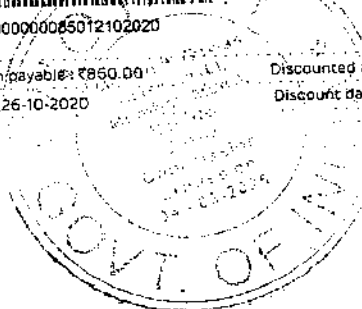
03783/A3783/B117/S10/R3783

b/f (₹) : B.10

Round sum payable: ₹850.00  
Due date: 26-10-2020

Discounted amount : ₹ 850.00  
Discount date: 12-10-2020

Amount after due date : ₹870.00





महानगर टेलीफोन निगम लिमिटेड, मुंबई  
MAHANAGAR TELEPHONE NIGAM LTD, MUMBAI  
टेलीफोन बिल फॉल/TELEPHONE BILL FOL

ANTHONY ALEX  
FLT 10, VILLA REMEDIAN  
S V ROAD  
MADONA CLNY, BORIVLI  
MUMBAI-400092

|          |     |     |
|----------|-----|-----|
| बिल - 41 |     |     |
| exllo    | 950 | 240 |
| R10734   |     |     |

टेलीफोन नं 8900363 6 बिल की तारीख 15/07/97  
TELEPHONE NO 8900363 6 BILL DATE 08/08/97  
टेलीफोन के बियोजन से बचने के लिए कृपया निम्न तिथि के अंदर भुगतान करें।  
TO AVOID DISCONNECTION PAY BY DUE DATE

|                                                               |                                                               |                                    |                             |                                |                              |                                                  |
|---------------------------------------------------------------|---------------------------------------------------------------|------------------------------------|-----------------------------|--------------------------------|------------------------------|--------------------------------------------------|
| 00000000                                                      | 00000287                                                      | 287                                | 0                           | 0                              | 235                          | 52                                               |
| 28/03/97                                                      | 01/07/97                                                      |                                    |                             |                                |                              |                                                  |
| पिछली मीटर रीडिंग व तारीख<br>PREVIOUS METER<br>READING & DATE | मौजूदा मीटर रीडिंग व तारीख<br>CURRENT METER<br>READING & DATE | मीटर की गई कॉल<br>METERED<br>CALLS | डेबिट कॉल<br>DEBIT<br>CALLS | क्रेडिट कॉल<br>CREDIT<br>CALLS | निशुल्क कॉल<br>FREE<br>CALLS | विशुद्ध प्रभार्य कॉल<br>NET CHARGE<br>ABLE CALLS |

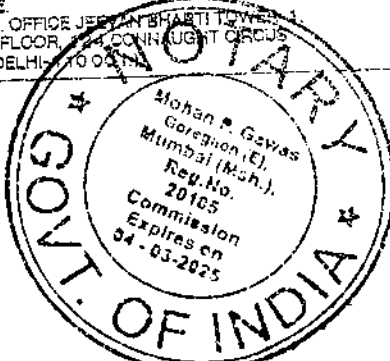
|                                                      |                         |                     |
|------------------------------------------------------|-------------------------|---------------------|
| CALL CHARGES - LOCAL & STD (IF ANY)                  | राशि<br>AMOUNT<br>₹ Rs. | TOTAL AMOUNT<br>₹ P |
| 52 CALLS                                             | 41.60                   | 41.60               |
| RENTAL CHARGES. 28/03/97-30/09/97                    |                         | 1159.00             |
| ACCESSORIES CHARGED UPTO<br>0000STD BARRING 27/03/98 | 0.00                    | 0.00                |
| INSTALLATION CHARGE                                  |                         | 800.00              |
| 5 PER CENT LEVY OF SER. TAX                          |                         | 100.03              |
| 42 INT. ON DEP. 150.00 DATE 27/09/96                 |                         |                     |
| 44 CREDIT BAL. 720.00 DATE 27/09/96                  |                         |                     |
| **** AMOUNT ADJUSTED ***                             |                         | 870.00              |
| NET AMOUNT PAYABLE                                   |                         | 1231.00             |
| *PAY BY DATE 08/08/97. SUR. CH. 40.00                |                         |                     |
| *AMOUNT PAYABLE AFTER P. B. D                        | 1271.00                 |                     |



RECEIVED  
26 JUL 1997

मुद्रा मुक्त के लिए प्रमाणपत्र  
(विज्ञापन के माध्यम से, जीवन कालीन कार्ड-1  
12वीं मंजूर. 124, कनाट सर्कस  
नई दिल्ली-110001)

E & O.E.  
(REGD. OFFICE JEEVAN BHARTI TOWER  
12TH FLOOR, 124, CONNAUGHT CIRCUS  
NEW DELHI-110001)



लेखापराधिकारी, टेलीफोन निगम  
ACCOUNTS OFFICER, TELEPHONE-REVENUE

140  
135

|           |     |     |
|-----------|-----|-----|
| पत्र - 61 |     |     |
| EXCC      | 97C | 240 |
| 2022      |     |     |



**डेना बैंक पासबुक**  
**DENA BANK PASSBOOK**

व्यक्तिगत जानकारी / PERSONAL DETAILS

ग्राहक का नाम: **MR. AMIN ANTHONY**

ग्राहक आईडी / Customer ID: **006613092**

खाता सं. / Account No: **048710002748**

पैन सं. / PAN No: **AZLPA5131C**

टेलीफोन सं. / मोबाइल सं.:  
Tel No./Mobile No.: **022-28926181**

ई-मेल आईडी / Email ID: **mountp@denabank.co.in**

पता / Address: **FLAT NO 10 VILLA REMEDIAN NR BHAGYATI HOSEI**

**MADONA CLNY BORIVALI 400103 INDIA**

व्यक्ति का प्रकार / Mode of Operation: **XXXXX**

परिवार का प्रकार / Mode of Operation: **EITHER OR SURVIVORS**

खाता खोलने की तिथि / Date of A/c opening: **23-01-1985**

जारी करने की तिथि / Date of issue: **22-06-17**

पेंशन मुताबिक आदेश सं. / Pension Payment Order no.: **XXXXX**

डेना बैंक, मुंबई

व्यक्ति का नाम: **ANAND BHUVAN GRD. FL., SARDAR**

ग्राहक आईडी / Customer ID: **400103**

खाता सं. / Account No: **022-28926181**

पैन सं. / PAN No: **mountp@denabank.co.in**

टेलीफोन सं. / मोबाइल सं.:  
Tel No./Mobile No.: **BKDN0460487**

ई-मेल आईडी / Email ID: **400018077**

पता / Address: **ANAND BHUVAN GRD. FL., SARDAR**

व्यक्ति का प्रकार / Mode of Operation: **XXXXX**

परिवार का प्रकार / Mode of Operation: **EITHER OR SURVIVORS**

खाता खोलने की तिथि / Date of A/c opening: **23-01-1985**

जारी करने की तिथि / Date of issue: **22-06-17**

पेंशन मुताबिक आदेश सं. / Pension Payment Order no.: **XXXXX**

डेना बैंक, मुंबई

व्यक्ति का नाम: **ANAND BHUVAN GRD. FL., SARDAR**

ग्राहक आईडी / Customer ID: **400103**

खाता सं. / Account No: **022-28926181**

पैन सं. / PAN No: **mountp@denabank.co.in**

टेलीफोन सं. / मोबाइल सं.:  
Tel No./Mobile No.: **BKDN0460487**

ई-मेल आईडी / Email ID: **400018077**

पता / Address: **ANAND BHUVAN GRD. FL., SARDAR**

व्यक्ति का प्रकार / Mode of Operation: **XXXXX**

परिवार का प्रकार / Mode of Operation: **EITHER OR SURVIVORS**

खाता खोलने की तिथि / Date of A/c opening: **23-01-1985**

जारी करने की तिथि / Date of issue: **22-06-17**

पेंशन मुताबिक आदेश सं. / Pension Payment Order no.: **XXXXX**

डेना बैंक, मुंबई

146

आयकर विभाग  
INCOME TAX DEPARTMENT



भारत सरकार  
GOVT. OF INDIA

AMMINY ANTHONY  
CHANDAPILLA KUNNIVADAKKA

13/12/1932

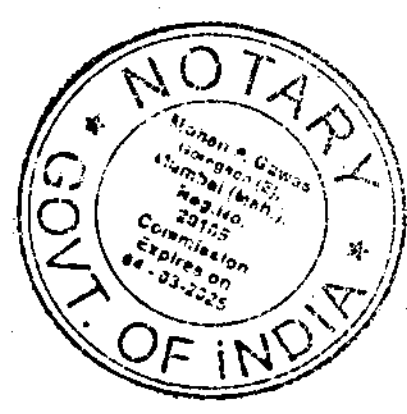
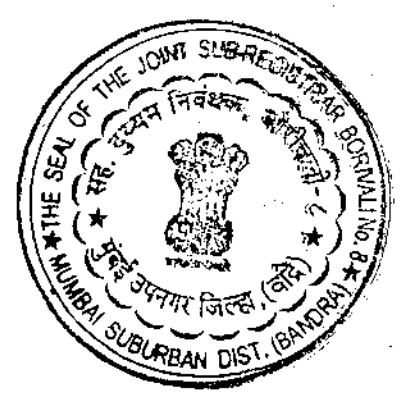
Permanent Account Number

AZLPA5131C

Amminy Anthony  
Signature



|         |     |     |
|---------|-----|-----|
| ब.र. 61 |     |     |
| exllo   | eye | 240 |
| २०३२    |     |     |



142  
137

21 Con

|         |     |     |
|---------|-----|-----|
| रस - 61 |     |     |
| 9800    | 380 | 240 |
| 2022    |     |     |



राष्ट्रीय विशिष्ट पहचान प्राधिकरण

भारत सरकार

Unique Identification Authority of India  
Government of India

सामाजिक क्रांति Enrolment No.: 1207/00104/01090

To,

Aaminy Anthony

अमिनी अन्थोनी

W/O Thomas Kuttanpore Anthony

302, Classic, Sonagram CHS L.M. Road, Navagach Behind

Navagach Bus Stop Dahisar West

Mumbai

Mumbai (Sub Urban)

Maharashtra 400069

Mobile: 9920551990

16/11/2011



UC 64174795 4 IN

Ref No. 462B302X-4174795



आपका आधार क्रमांक / Your Aadhaar No. :

2018 0047 8842

आधार — आम आदमी का अधिकार



भारत सरकार  
GOVERNMENT OF INDIA

अमिनी अन्थोनी

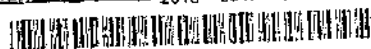
Aaminy Anthony



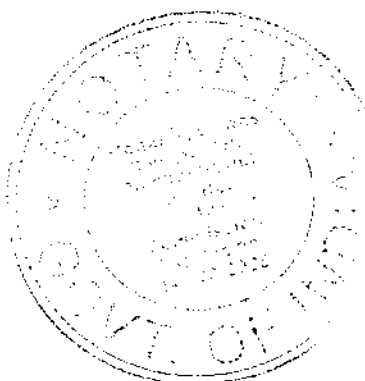
जन्म वर्ष / Year of Birth : 1992

महिला / Female

2018 0047 8842



आधार — आम आदमी का अधिकार





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सद्यग्रह

Join us at #KVMUS2019 and get to be part of our clean energy drive



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Use any bank / UPI App

adani  
Electricity

Flat - 11  
143

**BILL OF SUPPLY** **RESIDENTIAL**

www.adanelectricity.com

**DITOSA MARIA GILBERTA VARELLA**  
FLAT 11 2ND FLOOR VILLA REMEDIAN,  
MADONNA COL MANDPESHWAR ROAD,  
BORIVLI W NR DOMINOS PIZZA MUMBAI  
400092

Mobile No. 98\*\*\*\*60  
Email ID s\_\*\*\*\*@dataone.in  
Connected Load 0.30kW

To update your email id and mobile no., call us on 19122.

**24x7 Powerline**  
**19122** We're listening.

For power interruption complaint or restoration status

SMS POWER (9 digit account no.) to 7065313030 from any mobile no.  
Give us a missed call on 1800 537 9998 from your registered mobile no.  
Whatsapp POWER (9 digit account no.) to 9594519122 from any mobile number

CUSTOMER CARE CENTER / CORRESPONDENCE ADDRESS  
/ INTERNAL COMPLAINTS ADDRESS (DO NOT)  
Adani Electricity Customer Care Center 113 G,  
S V Road Khar West, Mumbai 400057

www.adanelectricity.com

Join us on

0000 **exllo** 989 240

Circle No. 13

2022

Bill No. 100569065419 Bill Date 03-02-2020 Type of Supply SINGLE PHASE  
Bill Distribution No. NORTH/W22-BORIVLI (W) N3/21B/217/017/012

**YOUR CURRENT CONSUMPTION**

| Tariff | Meter number | Multiplying Factor (MF) | Present reading | Previous reading | Consumption (Units kWh) | Energy charge (₹) | Fixed charge (₹) |
|--------|--------------|-------------------------|-----------------|------------------|-------------------------|-------------------|------------------|
| DT (B) | 5713321      |                         | 119.00          | 119.00           | 0.00                    | 0.00              | 65.00            |
| Total  |              |                         |                 |                  | 0                       | 0.00              | 65.00            |

**TRACK YOUR CONSUMPTION (UNITS)**

|        |   |
|--------|---|
| Dec-19 | 0 |
| Nov-19 | 0 |
| Oct-19 | 0 |
| Sep-19 | 0 |
| Aug-19 | 0 |
| Jul-19 | 0 |
| Jun-19 | 0 |
| May-19 | 0 |
| Apr-19 | 0 |
| Mar-19 | 0 |
| Feb-19 | 0 |
| Jan-20 | 0 |
| Jan-19 | 0 |

**IMPORTANT MESSAGE**

- Meter showing abnormal consumption. Please do not tamper with meter. Call the meter number 19122 for assistance.
- Meter showing abnormal consumption. Please do not tamper with meter. Call the meter number 19122 for assistance.
- Meter showing abnormal consumption. Please do not tamper with meter. Call the meter number 19122 for assistance.
- Meter showing abnormal consumption. Please do not tamper with meter. Call the meter number 19122 for assistance.
- Meter showing abnormal consumption. Please do not tamper with meter. Call the meter number 19122 for assistance.



ACCOUNT NO.  
152104461



BILL MONTH  
JAN-20



DUE DATE  
24-02-2020\*

Electric Smiles

SMILES EARNED  
200

**DUE AMOUNT**

70.00

Earn Points on E-payments/  
Cashless Payments. Please login to  
Adani Electricity Mobile App to  
view/redeem points (Electric Smiles) earned.

**DISCOUNTED BILL AMOUNT**

Round sum bill payable (after discount of ₹ 0.65) on or before discount date 10-02-2020 ₹ 70.00

**LATE PAYMENT BILL AMOUNT**

Round sum bill payable (including DPC of ₹ 0.94) after due date 24-02-2020 ₹ 60.00\*

\*Terms only as current bill amount.  
Previous balance is payable in full.  
\*Payable until one month after due date, thereafter interest applicable as per AERC tariff order.

Sajimon

SAJIMON NANOO  
Commercial Management Head  
(K&P Division)



Electricity bill payments,  
now more convenient.

Introducing the GeniusPay added in your locality

**geniusPay**

PAYMENTS MADE SIMPLE

Payment modes available - Cash - Cheque - Card - Online

Open as days from 7 AM to 11 PM

Also available for cheque, bill cash E&E, Credit/Debit cards and bill to credit to  
CSO/18/2019/4980 dated 22/10/2019

For more information, visit our website  
www.adanelectricity.com

If paying by cheque, please remember:

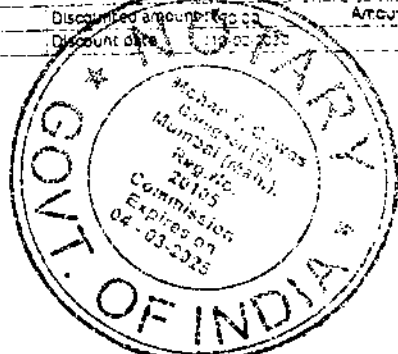
- Cheque should be Account Payee of local clearing and not post-dated
- Always attach payment slip. Do not staple.
- Make cheque payable to Adani Electricity Mumbai Ltd. A/C No. : 152104461
- Mention A/C No. and respective amount on back of the cheque, when making multiple bill payments by single cheque.



Ref. No. : R3746143874387-54534  
b/f (₹) : 4.62

13 218-217  
017-012-401

Round sum payable: ₹ 70.00 Discounted amount: ₹ 0.65 Amount after due date: ₹ 70.65  
Jan-20 152104461/71 Due date: 24-02-2020 Discount date: 10-02-2020



139  
Flat No. 12 143

**MRS. D. GILBERTA VARELLA**

**OWNER OF VILLA REMEDIAN**

Plot No. 9, Madonna Colony, BORIVLI (West), Bombay-400 103.

Bill No. 1547

Date 3-2-1985

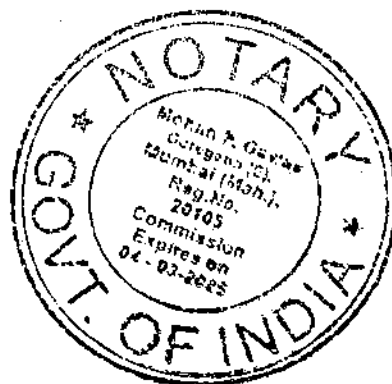
Tenant's Name Mrs. Mary John  
2nd Floor Block No. 12

Rent of the above mentioned place occupied by you as monthly tenant subject to the terms agreed by you Rs. 129. per month including taxes and service charges for the month of Jan. 1985 Rs. 86.  
Total Rs. 215

Rent Rs. 215-

Signature [Signature]  
3-2-1985 994

|          |     |     |
|----------|-----|-----|
| खरल - 61 |     |     |
| EXLO     | 982 | 240 |
| 1033     |     |     |



149

|           |     |     |
|-----------|-----|-----|
| वर्ग - 61 |     |     |
| २४८०      | ९६३ | २४० |

**MRS. D. M. GILBERTA VARELLA**

OWNER OF VILLA REMEDIAN

14, VILLA REMEDIAN, MADONNA COLONY, BORIVALI (W), MUMBAI 400 103

Bill No: **099**

Date: **28-10-2020**

Tenant's Name: **Mr. Lajin John**  
**2<sup>nd</sup>** Floor, Flat No: **12**

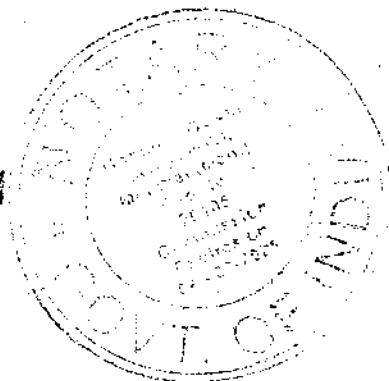
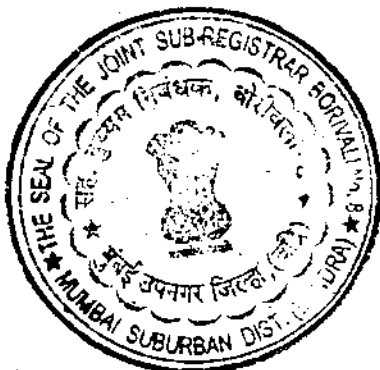
Rent of the above flat occupied by you Rs: **900** per month, including taxes  
& service charges for/from the month of **01 APR 2020 UNTIL 31 DEC 2020**

Total Rs: **8100/-**

In words Rs. **Eight thousand one hundred only**

Signature **[Signature]**  
LEGAL HEIR

**28-10-2020**  
Date received



148

# BSES Limited

Tel. No. 6100505

ELECTRICITY HOUSE, POST BAG NO. 6808, SANTACRUZ (EAST), MUMBAI 400 055.



| Date of Bill | Bill For | CONSUMER NUMBER | CYCLE | BOOK | DEL BOOK |
|--------------|----------|-----------------|-------|------|----------|
| 16-10-98     | SEP-98   | K13980069       | 12    | 218  | 61       |

IVR-NO.4213980069  
INVOICE NO. 14-73A  
PLEASE QUOTE  
CONSUMER NUMBER,  
CYCLE & BOOK

P G JOHN  
12 REMEDIAN VILLA  
MADONA COLONY 3 V ROAD  
BORIVALI MUMBAI

8866  
988 240  
Please take notice that you have not paid the amount of Rs. 2

| TARIFF | METER NUMBER | PRESENT READING | UNITS | METER RENT | ELECTRICITY CHARGE |
|--------|--------------|-----------------|-------|------------|--------------------|
| LF1    | 0266351      |                 | 51    |            | 21480              |
| LF1    | 2263881      |                 | 51    | 200        |                    |

mentioned in this bill (BSES) and if the amount of arrears is not paid within seven days from the date of receipt hereof the supply of electricity to your premises will be discontinued under the provisions of Section 24 (1) of the Indian Electricity Act, 1910. The supply will be restored thereafter only after the receipt of the payment of all dues and a reconnection fee. This notice does not invalidate any previous notice.

\* PRINTED in electricity charge column No. (6) Indicates minimum charge(s)

\* PRINTED in electricity charge column No. (6) indicates minimum charges.

| Fuel adjustment rate (Paise/Unit)                                    | FUEL ADJUSTMENT CHARGE Rs. | SURCHARGE TO BULK SUPPLIER Rs. | GOVERNMENT DUTY Rs. | TOTAL CHARGES (Col. 5 to Col. 9) Rs. | ASSESSED BILL ADJUSTMENT (CREDIT) Rs. | CURRENT MONTHS 12 BILL AMOUNT (A) (Col. 10-11) Rs. |
|----------------------------------------------------------------------|----------------------------|--------------------------------|---------------------|--------------------------------------|---------------------------------------|----------------------------------------------------|
| 43.000                                                               | 1376                       | 102                            | 2386                | 25444                                |                                       | 25444                                              |
| PREVIOUS TOTAL BILL AMOUNT Rs.                                       | PAYMENT RECEIVED Rs.       | ADJUSTMENT                     |                     | NET (B) BROUGHT FORWARD Rs.          |                                       | TOTAL BILL (A+B) AMOUNT Rs.                        |
|                                                                      |                            | CODE                           | AMOUNT Rs.          |                                      |                                       |                                                    |
| 8161-                                                                | 00                         |                                | 00                  |                                      | 816108                                | 17283                                              |
| * Payment made by cheque is issued subject to realisation of cheque. |                            |                                |                     | DUE DATE FOR PAYMENT MONTHS          |                                       | ROUNDSUM NOW PAYABLE                               |

Receipt of Payment made by cheque is issued subject to realisation of cheque.

*Moglikar*  
EXECUTIVE DIRECTOR

Consolidated Stamp Duty paid by Order No. MUDRANK-1598/1333/C.R. 218/M-1 DT: 27/03/1998.  
Payment received after not accounted  
Produce receipt at counter for acceptance of net amount  
Cheques stapped to stubs not acceptable.

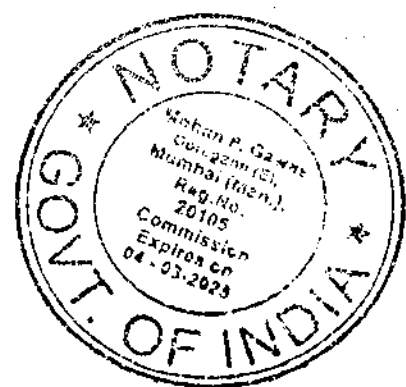
| DUE DATE FOR CURRENT MONTH'S BILL ONLY | ROUNDSUM NOW PAYABLE Rs. |
|----------------------------------------|--------------------------|
| 07-11-98                               | 173--                    |

PAYMENT TO BE MADE AT AUTHORISED COLLECTION CENTRES ONLY AND OBTAIN RECEIPT  
Please do not pay cash at site to any person towards the bill/other charges

IMPORTANT MESSAGES : (For detailed explanation of rates, please see overleaf)

(IVR-NO.4213980069) IN CASE OF NO SUPPLY FILE STAMP

16 NOV 1998  
RECEIVED CASH  
CHARGE No. 85 BORIVALI



006800000008012102020

sum payable: ₹80.00

ate: 26-10-2020

GOVT. O.

BMPP-4544-97-5,000 Bks. of 200 Lvs.

|                 |     |     |
|-----------------|-----|-----|
| No. 418594      |     |     |
| महाराष्ट्र - ८१ |     |     |
| PH-570          | 988 | 240 |
| ३०२२            |     |     |

बृहन्मुंबई महानगरपालिका  
MUNICIPAL CORPORATION OF GREATER BOMBAY  
सार्वजनिक आरोग्य विभाग  
PUBLIC HEALTH DEPARTMENT  
नमूना क्र. १०. FORM NO. 10.

(महाराष्ट्र जन्म-मृत्यु-नोंदणी, १९७६ मधील नियमावली, नियम ९ कप्या वहावा)  
(See Rule 9 of the Maharashtra Registration of Births & Deaths Rules, 1976).

मृत्यु नोंदणीचे प्रमाणपत्र  
CERTIFICATE OF DEATH

१९६९ च्या जन्म-मृत्यु नोंदणी कायद्याच्या कलम १२/१७ च्या अन्वयेने  
Issued under Section 12/17 of the Registration of Births and Deaths Act, 1969.

असा दाखला देण्यात येतो की, खाली नमूद केलेली माहिती बृहन्मुंबई महानगर पालिकेच्या \_\_\_\_\_ विभागाच्या मृत्यु पुस्तकातून घेतलेली आहे.  
This is to certify that the following information has been taken from the original record of death, which is in the register for \_\_\_\_\_ R.D.N. ward of Municipal Corporation of Greater Bombay.

नाव \_\_\_\_\_  
Name \_\_\_\_\_  
राष्ट्रीयत्व \_\_\_\_\_  
Nationality \_\_\_\_\_  
कार्मका वास्तव्याचा पत्ता \_\_\_\_\_  
Permanent Address \_\_\_\_\_  
मृत्यु दिनांक \_\_\_\_\_  
Date of Death \_\_\_\_\_  
नोंदणी दिनांक \_\_\_\_\_  
Date of Registration \_\_\_\_\_  
जेथे मृत्यु झाला ते ठिकाण \_\_\_\_\_  
Place of Death \_\_\_\_\_  
वडील/आई/नवरा यांचे नांव \_\_\_\_\_  
Name of Father/Mother/Husband \_\_\_\_\_

दाखला देणाऱ्या अधिकार्याची स्वाक्षरी \_\_\_\_\_  
Signature of the Issuing Authority \_\_\_\_\_  
दिनांक \_\_\_\_\_  
Date \_\_\_\_\_  
सिक्कम \_\_\_\_\_  
SEAL \_\_\_\_\_

सूचना - मृत्युनोंदणीच्या दाखल्यात संबंधित पुस्तकात नोंदलेल्या मृत्युविषयक कारणांची माहिती नोंदवावयाची नाही.  
उपकलम १७ (१) चे तरतुदे बहावी.

Note - In the case of Death, no disclosure shall be made of particulars regarding the 'cause of death' as entered in the register. See proviso to Sub-section 17 (3).

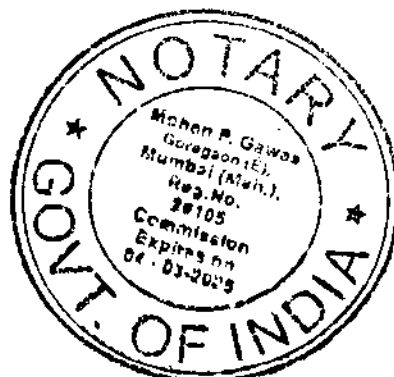
M. HESH S. JUNNARKAR

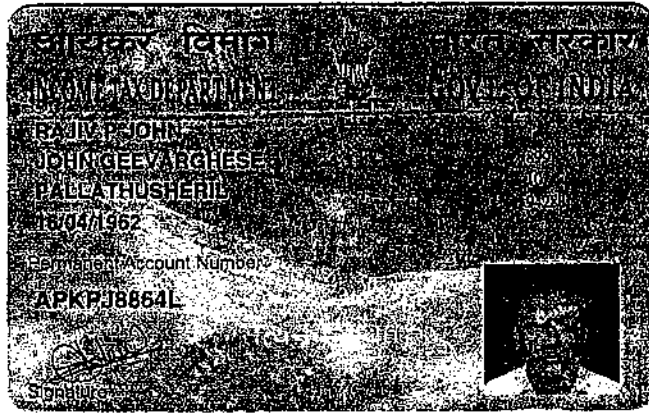
विशेष कार्यकारी अधिकारी (महाराष्ट्र शासन)

Special Executive Officer S. R. 28-7226

206, Saraswati Apts., Borivli (W), Mumbai-103

सन्ना प्रत





|          |      |     |
|----------|------|-----|
| बिल्ट 61 |      |     |
| EXCU     | SECU | 240 |
| 2032     |      |     |





भारत सरकार

GOVERNMENT OF INDIA



Rajiv Pallathusheril John  
Date of Birth/DOB: 16/04/1962  
Male/ MALE  
Mobile No: 8652442453



9578 5887 6621

**MEERA AADHAAR, MERI PEHCHAN**



आधार

भारतीय विशिष्ट पहचान प्राधिकरण  
UNIQUE IDENTIFICATION AUTHORITY OF INDIA

Download Date: 27/02/2018

Address :

S/O: John Geevarghese, H NO-27/B- La  
Marcela Colony, Deulwada, Khandola,  
Orgao, North Goa,  
Goa - 403107

Generation Date: 02/01/2013



1947  
1800 300 1947

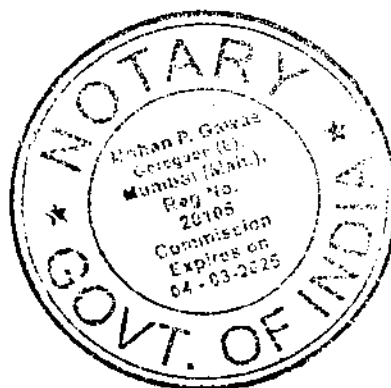


help@uidai.gov.in

WWW

www.uidai.gov.in

P.O. Box No. 1947,  
Bengaluru-560 001





The power of service

स्वच्छगृह

Join us at [www.swachhagraha.org](http://www.swachhagraha.org)  
to be part of our cleanliness drive



SCAN CODE TO PAY YOUR BILL VIA UPI  
Use any bank / UPI App

adani  
Electricity

Flat 13/14

# BILL OF SUPPLY

## RESIDENTIAL

DITOSA MARIA GILBERTA VARELLA  
R NO 14 VILLA REMEDIAN MADONNA  
COLONY III FLOOR MANDPESHWAR  
ROAD BORIVALI W MUMBAI 400103

Mobile No.

Email ID s\_\*\*\*\*@dataone.in

Connected Load 1.31kW

To update your email id and mobile no., call us on 19122.



ACCOUNT NO.

151207966



BILL MONTH

JAN-20



DUE DATE\*

24-02-2020\*

Electric  
Smiles

SAVES EARNED  
570

# DUE AMOUNT

1050.00

NEW

Earn Points on E-payments/  
Cashless Payments. Please login  
to Adani Electricity Mobile App to  
view/redeem points (Electric  
Smiles) earned.

## DISCOUNTED BILL AMOUNT

Round sum bill payable (after discount  
of ₹ 8.81 ) on or before discount  
date 10-02-2020 ₹ 1040.00

## LATE PAYMENT BILL AMOUNT

Round sum bill payable (including  
DPC of ₹ 13.20 ) after due  
date 24-02-2020 ₹ 1070.00

\*Payable only to current bill amount.  
Previous balance is payable immediately.  
\*Payable until one month after due date, thereafter  
interest applicable as per MERC tariff order.

Sajimon

SAJIMON NANOO

Commercial Management Head  
(North Zone)

24x7 Powerline

19122 We're listening.

For power  
interruption  
complaint or  
restoration  
status

SMS POWER <9 digit account no.> to  
7065313030 from any mobile no.  
Give us a missed call on 1800 532 9998  
from your registered mobile no.  
Whatsapp POWER <9 digit account no.>  
to 9594519122 from any mobile number.

CUSTOMER CARE CENTRE / CORRESPONDENCE ADDRESS  
/ INTERNAL GRIEVANCE REDRESSAL CELL (IGRC)  
Adani Electricity, Customer Care Center, 369 D,  
S.V. Road, Kandivall West, Mumbai 400057.

[www.adanielelectricity.com](http://www.adanielelectricity.com)  
[helpdesk.mumbai@adanielelectricity.com](mailto:helpdesk.mumbai@adanielelectricity.com)

Join us on

1 0 0 0

Bill No. 101503561722

Bill Date 03-02-2020

Type of Supply SINGLE PHASE

Bill Distribution No. NORTH/NZ2-BORIVILI (W) /13/218/217/017/015

Cycle No. 13

## YOUR CURRENT CONSUMPTION

| Tariff | Meter number | Multiplying Factor (MF) | Present reading | Previous reading | Consumption (Unit kWh) | Energy charge (₹) | Fixed charge (₹) |
|--------|--------------|-------------------------|-----------------|------------------|------------------------|-------------------|------------------|
| LT1(B) | 7417743      | 1                       | 17545.00        | 17413.00         | 132.00                 | 492.64            | 105.00           |
| Total  |              |                         |                 |                  |                        | 132               | 492.64           |
|        |              |                         |                 |                  |                        |                   | 105.00           |

## TRACK YOUR CONSUMPTION (UNITS)

|        |     |
|--------|-----|
| Dec-19 | 116 |
| Nov-19 | 134 |
| Oct-19 | 72  |
| Sep-19 | 45  |
| Aug-19 | 45  |
| Jul-19 | 44  |
| Jun-19 | 77  |
| May-19 | 224 |
| Apr-19 | 130 |
| Mar-19 | 126 |
| Feb-19 | 101 |

IMPORTANT MESSAGE

- Install earth leakage protection device for sanctioned load 11kW and above to prevent harmful electric shock.
- Tentative meter reading date for your Feb-20 bill is 28/02/2020.
- Please check/update your PAN number by visiting nearest Customer Care Center or email to [helpdesk.mumbai@adanielelectricity.com](mailto:helpdesk.mumbai@adanielelectricity.com) with copies of PAN for verification. If already submitted & correctly printed on the bill please ignore this message.

adani  
Electricity



Electricity bill payments,  
now more convenient.

Introducing the GeniusPay outlet in your locality.

geniusPay

PAYMENTS MADE SIMPLE

Payment modes available • Cash • Cheque • Card • Online

Open all days from 7AM to 11 PM

Ashr. In receipt: 'C' for cheque, 'C' for cash. ERO.E. Consolidated stamp duty paid by order no.  
CSO/183/2019/4980 dated 22.10.2019

For Advertisement, please contact on  
[info@seshaasaf.com](mailto:info@seshaasaf.com)

If paying by cheque, please remember:

- Cheque should be Account Payee of local clearing and not post-dated
- Always attach payment slip. Do not staple.
- Make cheque payable to Adani Electricity Mumbai Ltd, A/C No. : 151207966
- Mention A/c No. and respective amount on back of the cheque, when making multiple bill payments by single cheque.



Ref. No. : R3752\4387\4387-54540

13/218/217

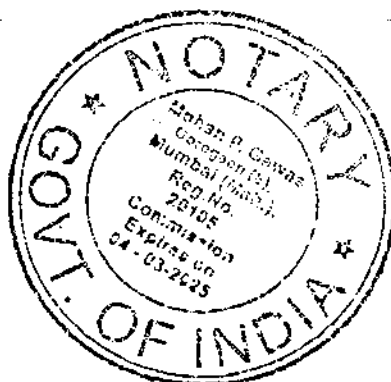
b/f (₹) : 2.86

017/015/A01

Round sum payable: ₹1050.00  
Jan-20 151207966/67 Due date : 24-02-2020

Discounted amount : ₹1040.00  
Discount date : 10-02-2020

Amount after due date : ₹1070.00

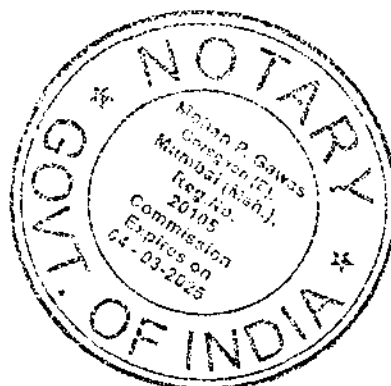


Flat No. 152

|        |     |     |
|--------|-----|-----|
| बसक 61 |     |     |
| एचएच   | 900 | 240 |

|                                                                                     |                                                                                     |
|-------------------------------------------------------------------------------------|-------------------------------------------------------------------------------------|
| स्थायी लेखा संख्या / PERMANENT ACCOUNT NUMBER                                       | ACDPV3551E                                                                          |
| नाम / NAME                                                                          | SAVIO REMEDIAN VARELLA                                                              |
| पिता का नाम / FATHER'S NAME                                                         | ANDREW CASABIAN VARELLA                                                             |
| जन्म तिथि / DATE OF BIRTH                                                           | 17-09-1959                                                                          |
| हस्ताक्षर / SIGNATURE                                                               |  |
| आयकर अधिकारी (कंप्यूटर प्रशासन)<br>Commissioner of Income-tax (Computer Operations) |                                                                                     |

*Savio Remedian Varella*



155  
OWNERS  
Flats #, 13 & 14  
AS PER PR



राष्ट्रीय विशिष्ट ओलख प्रणाली  
भारत सरकार  
Unique Identification Authority of India  
Government of India

नॉदणी क्रमांक/Enrolment No.: 1218/17663/03215

|          |      |     |
|----------|------|-----|
| वरल - ८१ |      |     |
| २४८७     | ३०७९ | २५० |
| २०२२     |      |     |

To: Ditosa Maria Gilberta Varela  
(दितोसा मारिया गील्बेर्ता वरेल्ला)  
14 Villa Remedios  
Near Bhagwati Hospital  
Madona Colony  
Borivali West  
Mumbai  
Maharashtra - 400103

Date: 06/08/2011

Ref. No.: 00008449-00044604-00028479-



UA 03339241 5 IN

आपला आधार क्रमांक / Your Aadhaar No.:

**4326 5014 7980**

आधार - सामान्य माणसाचा अधिकार



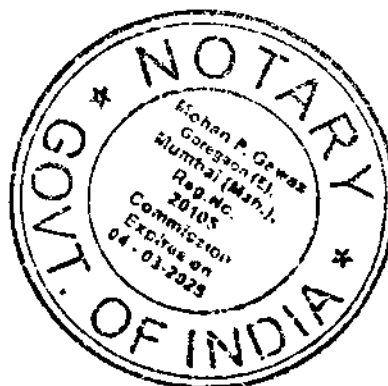
भारत सरकार  
GOVERNMENT OF INDIA  
दितोसा मारिया गील्बेर्ता वरेल्ला  
Ditosa Maria Gilberta Varela

जन्म वर्ष / Year of Birth: 1935  
स्त्री / Female

4326 5014 7980



आधार - सामान्य माणसाचा अधिकार



159  
Flat No. 15

**MRS. D. M. GILBERTA VARELLA**  
OWNER OF VILLA REMEDIAN  
14, VILLA REMEDIAN, MADONNA COLONY, BORIVALI (W), MUMBAI 400 103

|          |     |     |
|----------|-----|-----|
| बिल - 61 |     |     |
| 2800     | 502 | 240 |

Bill No.: 012

Date: 28-OCT-2020

Tenant's Name: Mr. Joseph Z. Cordeiro & Mrs. Valerie Cordeiro  
3rd Floor, Flat No: 15

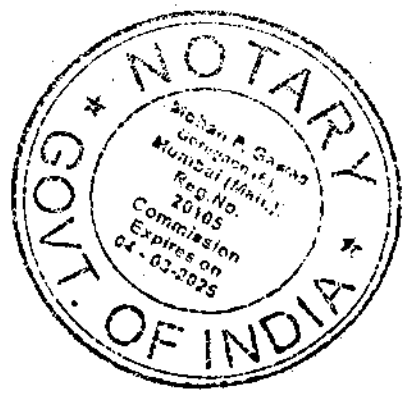
Rent of the above flat occupied by you Rs: 900/- per month, including taxes  
& service charges for/from the month of 01 JUN 2020 UNTIL 31 DEC 2020

Total Rs: 6300/-

In words Rs. Six thousand three hundred only

Signature [Signature]  
LEGAL HEIR

28-10-2020  
Date received



156

|            |     |
|------------|-----|
| बोरली - ८१ |     |
| २४०        | २४० |
| २४०        | २४० |

**MRS. D. GILBERTA VARELLA**

**OWNER OF VILLA REMEDIAN**

Plot. No. 9, Madonna Colony, BORIVLI (West), Bombay-400 103.

Bill No. **735**

Date **3-5-1980**

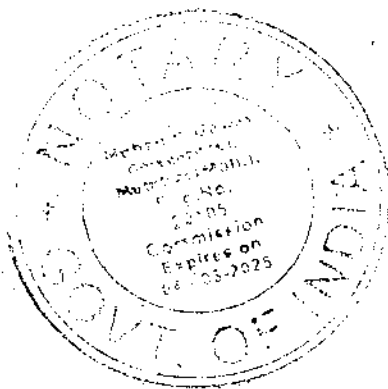
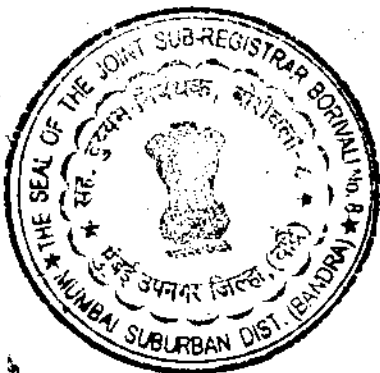
Tenant's Name Mrs D-H. Cordeiro

3rd Floor Block No. 15

Rent of the above mentioned place occupied by you as monthly tenant subject to the terms agreed by you Rs. 118 per month including taxes and service charges for the month of April 1980 Rs. 47  
Total Rs. 165

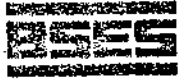
Rent Rs. 165

Signature [Signature]



दूरध्वनी क्रमांक ६१५१३४०  
६१२२२४०

# ऋणको बॉम्बे सबर्वन इलेक्ट्रिक सप्लाय लिमिटेड इलेक्ट्रिसिटी हाऊस, पत्रपेटी क्रमांक ६५०८ सांताक्रुझ (पूर्व) मुंबई ४०० ०४५.

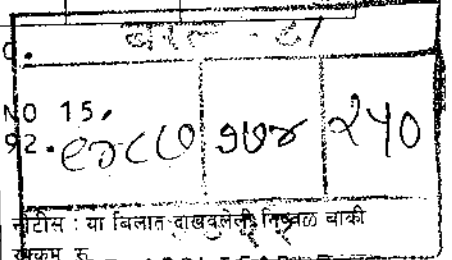


| बिलाची तारीख | बिलाचा महिना | ग्राहक क्रमांक | सायकल | बुक | डिलीव्हरी बुक |
|--------------|--------------|----------------|-------|-----|---------------|
| 16-11-90     | OCT-90       | K13980074      | 14    | 34A | 23A           |

पत्रव्यवहार करताना कृपया -

गृहक क्रमांक, सायकल व बुक क्रमांकांचे उल्लेख करावा.

SMT. D. H. CARDEIRO  
MADONNA COLONY,  
3RD FLOOR FLAT NO 15,  
BORIVLI, BOMBAY 92.



| १   | २            | ३                  | ४                 | ५                    | ६                   |
|-----|--------------|--------------------|-------------------|----------------------|---------------------|
| दर  | मीटर क्रमांक | विद्यमान<br>रिडिंग | वापरलेले<br>युनिट | मीटर भाडे<br>रु. पै. | बीज आकार<br>रु. पै. |
| LF1 | 1247460      | 2041               | 310               | 200                  | 30030               |

नोटीस : या बिलात दाखवलेली निव्वळ बाकी रक्कम आपण अद्याप भरलेली नाही. हे बिल मिळाल्यापासून सात दिवसात वरील बाकी रक्कम न भरल्यास आपला बीज पुरवठा इंडियन इलेक्ट्रिसिटी अक्ट १९१०, सेक्शन २४(१) च्या अन्वये खंडित केला जाईल त्यानंतर सर्व रक्कम व रु. २/- पुनर्जोडणी आकार भरल्यानंतरच बीज पुरवठा पुन्हा चालू करण्यात येईल. या नोटीशीमुळे पूर्वीची नोटीस रद्द होत नाही.

\* 'बीज आकार' स्तंभ ६ मध्ये ही रक्कम 'किमान आकार' या अर्थी आहे.

| इंधन समायोजन दर पैस/युनिट     | इंधन समायोजन आकार रु. | घाऊको पुरवठादरतना दिलेला अधिभार रु. | यंत्रकारी बिद्युत फा रु. | एकूण आकार (स्तंभ ५ ते ९) रु. | अंदाजित विलाची रक्कम वजा (जमा) रु.     | चालू महिन्याच्या विलाची रक्कम (ज) (स्तंभ १०-११) रु. |
|-------------------------------|-----------------------|-------------------------------------|--------------------------|------------------------------|----------------------------------------|-----------------------------------------------------|
| 5.800                         | 638                   | 00                                  | 3600                     | 34468                        | 12624                                  | 21844                                               |
| मार्गील विलाची एकूण रक्कम रु. | जमा रक्कम रु.         | अंदाजित मेट्र                       | कोड                      | रक्कम रु.                    | निव्वळ बाकी (ब) रु.                    | (अ+ब) एकूण विलाची रक्कम रु.                         |
| 12665                         | 12600                 |                                     |                          | 00                           | 65                                     | 21909                                               |
|                               |                       |                                     |                          |                              | चालू महिन्याचे विल भरण्याची नियत तारीख | पूर्णांक देय रक्कम रु.                              |
|                               |                       |                                     |                          |                              | 01-12-90                               | 21900                                               |

हे बिल अधिकृत भरणा केंद्रातच भरावे.

धनावेश (चेक) देऊन भरणा केलेल्या रकमेची पावती धनावेश बटल्यावरच अधिकृत समजली जाईल.

आपण विलाची रक्कम

12-11-90

या तारखेनंतर भरली

असल्यास निव्वळ देय रक्कम म्निवकारण्यासाठी आपली पावती दाखवावी.

CR = जमा

बुकभूल छापी घ्यावी

महत्वाचा संदेश : (सर्विस्तर टीप्याची माहितीसाठी मागे पहावे)

\* 03

NOTE-2 METER HAS BEEN READ ON 08-11-90. CONSUMPTION IS FOR 2 MONTHS. PREVIOUS ASSESSED BILL HAS BEEN ADJUSTED. TARIFF REVISED FROM 01-08-90

