

Seen and ascertained
1. W 27/8/2019
2. Gen 27/8/19

FIRST INFORMATION REPORT
(Under Sections 154 Cr.P.C)

1. District... **YSR District**... P.S... **ACB, Kadapa**, Year ... **2019**.

F.I.R No. **04/RCT-KDP/2019**... Date... **27-08-2019**... Time : **08.30 AM**.

2. (i) Act : u/s **7 of Prevention of Corruption (Amendment) Act, 2018**,

3. (a) Occurrence of Offence : Day.. **Prior to 26-08-2019**. Date from... --... Date to
Time Period Time from..... Time to

(b) Information received at P.S : Date : **26-08-2019**... Time... **06.00 PM**

(c) General Diary Reference: Entry No.....--..... Time.....--.....

4. Type of Information: **Telugu written complainant**

5. Place of Occurrence: (a) Direction and Distance from P.S: **South-East 2. KM**.

Beat No.....

(b) Address : **O/o District Co-ordinator of Hospital Services, "O" Block,
New Collocotrate, Kadapa, YSR District.**

(c) In case, outside the limits of this Police Station, then, Name of P.S , District

6. Complainant/Informant:

(a) Name : **Smt. Sathe Radhika**,

(b) Father's/Husband's Name : **S. Sivaram Prakash**.

(c) Date/Year of Birth.. **30 years**.....(d) Nationality... **Indian- Hindu**.....

(e) Passport No.--..... Date of Issue--..... Place of Issue--.....

(f) Occupation: **Junior Asst. O/o District Co-ordinator of Hospital Services, Kadapa**.

(g) Address: **D.No.5/49, Brahmin Street, Kadapa city, YSR District**.

7. Details of known/suspected/unknown accused with full particulars:

(Attach separate sheet, if necessary)

Smt. Dr. M.S. Padmaja, District Co-ordinator of Hospital Services, Kadapa.

Physical features, deformities and other details of the suspect/accused (if known/seen)

Sl. No.	Sex	Date/Year of Birth	Build	Height (cms)	Complexion	Identification Marks
1	2	3	4	5	6	7

Deformities/ Peculiarities	Teeth	Hair	Eyes	Habit(s)	Dress Habit(s)
8	9	10	11	12	13

Language/ dialect	PLACE OF				
14	15	16	17	18	19

These fields will be entered only if complainant/informant gives any one or more Particulars about the suspect/accused.

8. Reasons for delay in reporting by the Complainant/Informant.....--.....

9. Particulars of properties stolen/involved (Attach separate sheet, if necessary).....

10. Total value of property stolen/involved:.....--.....

11. Inquest Report/U.D Case No., if any

12. First Information contents (Attach separate sheet, if required) :

A separate sheet is herewith enclosed.

13. **Action taken:** Since the above information reveals commission of offence(s) U/s 7 of Prevention of Corruption (Amendment) Act, 2018 as mentioned at Item No.2.

(1) Registered the case and took up the investigation or

(2) Directed (Name of I.O).....Rank.....No.....

to take up the investigation or

(3) Refused the investigation due to.....or

(4) Transferred to P.S Districton point of jurisdiction.

F.I.R read over to the Complainant, admitted to be correctly recorded and a copy given to the Complainant, free of cost.

ROAC

S. Radhika

14. Signature/Thumb Impression of the complainant.

M. Nagabhushanam
22/5/19

Signature of Officer In-charge, Police Station.

Name: **M. NAGABHUSHANAM,**
Deputy Supdt. Of Police,
ACB, Kurnool Range, Kurnool.
In-charge DSP, ACB Kadapa.