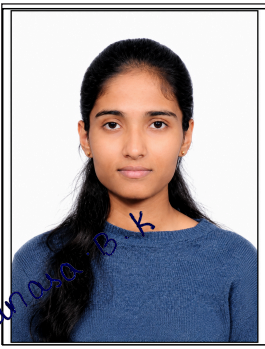


Manasa B K

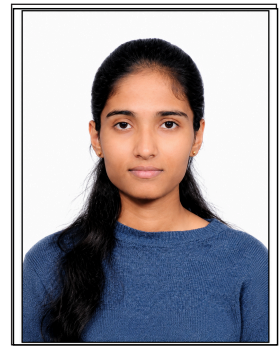


FORM NO. 93

[See rule 158]

Application for Allotment of Permanent Account Number

[For an Individual being a Citizen of India]



Sr. No.

PART A - Personal Information

1. A. Name

First Name

M A N A S A

Middle Name

B A N G A L O R E

Last Name

K U M A R

B. Name (as per Aadhaar)

M A N A S A

B K

2. Gender (select one)

☐ Male

☒ Female

☐ Transgender

3. Date of Birth

0 5

0 6

2 0 0 7

4. Aadhaar Number

7 4 9 9 3 4 9 1 7 3 4 0

5. Residence Address

Flat/Door/Building

1 S T

C R O S S

A D L I M A N E

R O A D

Road/Street/Block/Sector

W A R D

N O

1 6

S H I V A J Y O T H I

Post Office

H A S S A N

Area/Locality/Town/City

H A S S A N

District

H A S S A N

State/Union Territory

K A R N A T A K A

Country/Region

I N D I A

PIN / ZIP CODE

5 7 3 2 0 1

6. Office Address

Flat/Door/Building

Road/Street/Block/Sector

Post Office

Area/Locality/Town/City

District

State/Union Territory

Country/Region

PIN / ZIP CODE

7. Residential Status (select one as applicable)

☒ Resident

☐ Non Resident

☐ Resident but Not ordinarily Resident

8. Passport Number (mandatory for (i) Non Resident (ii) Resident but not ordinarily resident)

9. Taxpayer Identification Number (TIN) in the Country of Residence (if any)

10. Contact Details

(i) Mobile Number

Country Code

9 1

Mobile Number

9 0 1 9 4 9 3 7 3 8

(ii) Email ID

colorsnetzone@gmail.com

(iii) Landline No. with STD Code (if any) STD Code

Landline Number

PART B- Source of Income

11. Source of Income (select one or more)

☐ Salary

☐ Income from Business/Profession

☐ Income from House Property

☐ Capital Gains

☒ Income from Other Sources

☐ No Income

PART C - Details of Parents

12. Whether mother/father is a single parent? (select one)

☐ Yes

☒ No

13. Father's First Name

B A N G A L O R E

Father's Middle Name

Father's Last Name

K U M A R

15. Name of parent to be printed on Permanent Account Number card (select one) ☒ Father ☐ Mother

16. Assessing Officer (AO Code)	(i) Area Code	K	A	R	(ii) AO Type	W	
	(iii) Range Code	3	2	1	(iv) AO No.	9	2

[illegible][illegible][illegible][illegible]

22. Address for Communication (select one) ☒ Residence Address ☐ Representative Assessee Address ☐ Office Address

23. Documents submitted as Proof of Identity, Proof of Address and Proof of Date of Birth of the Applicant

☒ (i) Proof of Identity ☒ (ii) Proof of Address ☒ (iii) Proof of Date of Birth

☐ Tick (i) Proof of Identity ☐ Tick (ii) Proof of Address

MANASA B K

a. I, MANASA B K, in the capacity of SELF (Self/ Representative Assessee) do hereby declare that
what is stated above is true to the best of my knowledge and belief.

b. I declare that the applicant does not possess Permanent Account Number and shall be liable for legal consequences under Income-Tax Act, 2025 if this declaration is found to be incorrect

Place **HASSAN**

Date..23/07/2026

Manasa.B.K

(Signature /Left Hand Thumb Impression of Applicant or Representative
Assessee)

Name: MANASA B K

Designation: **AUTHORIZED PERSON**



भारत सरकार
भारत सरकार



ಭಾರತ ಸರ್ಕಾರ
Government of India

ಭಾರತೀಯ ವಿಶಿಷ್ಟ ಗುರುತು ಪ್ರಾಧಿಕಾರ
Unique Identification Authority of India

ನೋಂದಣಿ ಸಂಖ್ಯೆ Enrolment No.: 2825/11143/61080

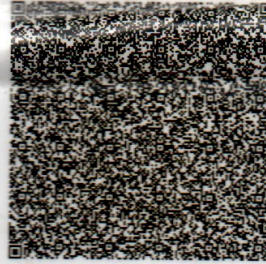
Download Date: 27/01/2021

To
ಮಾನಸ ಬಿ ಕೆ
Manasa B K
D/O: B Kumar
1st cross adlimane road
ward no 16
shivajyothi nagar
Hassan
Hassan
Hasan Karnataka - 573201
7975110689

Issue Date: 14/09/2020

Signature valid

Digital Signature
UNIQUE IDENTIFICATION
AUTHORITY OF INDIA 04
Date: 2021/01/27 16:40:15
IST



ನಿಮ್ಮ ಆಧಾರ್ ಸಂಖ್ಯೆ / Your Aadhaar No. :

7499 3491 7340

VID : 9144 7412 5937 8851

ನನ್ನ ಆಧಾರ್, ನನ್ನ ಗುರುತು



ಭಾರತ ಸರ್ಕಾರ
Government of India

Download Date: 27/01/2021



ಮಾನಸ ಬಿ ಕೆ
Manasa B K
ಜನ್ಮ ದಿನಾಂಕ/DOB: 05/06/2007
ಸ್ತ್ರೀ/FEMALE

Issue Date: 14/09/2020

7499 3491 7340

VID : 9144 7412 5937 8851

ನನ್ನ ಆಧಾರ್, ನನ್ನ ಗುರುತು



ಕರ್ನಾಟಕ ಸರ್ಕಾರ
GOVERNMENT OF KARNATAKA

ಕರ್ನಾಟಕ ಶಾಲಾ ಪರೀಕ್ಷೆ ಮತ್ತು ಮೌಲ್ಯನಿರ್ಣಯ ಮಂಡಳಿ, ಬೆಂಗಳೂರು
Karnataka School Examination and Assessment Board, Bengaluru

ಅಂಕಪಟ್ಟಿ ಹಾಗೂ ಪ್ರಮಾಣ ಪತ್ರ / Marks Statement cum Certificate

ಈ ಕೆಳಗೆ ನಮೂದಿತ ಅಭ್ಯರ್ಥಿಯು ಎಸ್.ಎಸ್.ಎಲ್.ಸಿ. ಪರೀಕ್ಷೆಯಲ್ಲಿ ತೇರ್ಗಡೆಯಾಗಿರುವುದನ್ನು ಪ್ರಮಾಣೀಕರಿಸಿದೆ.

This is to certify that the below mentioned candidate has passed S.S.L.C. Examination.

ವರ್ಷ/Year : **MARCH/APRIL - 2023**

અર્થિક બર્ગે / Candidate Type : CCE REGULAR FRESH

ತಾಯಿಯ ಹೆಸರು / Mother's Name : SAVITRAMMA

બિંગ / **GIRL**
Gender :

ಭಾಗ - ಎ / PART - A

ಗಳಿಸಿದ ಒಟ್ಟು ಅಂಕಗಳು (ಅಕ್ಷರಗಳಲ್ಲಿ) / TOTAL MARKS OBTAINED (IN WORDS) :	FIVE HUNDRED SIXTY-FOUR ONLY	Percentage / ಶೇಕಡಾವಾರು : (90.24%)
---	--	--

ಭಾಗ - ಬ / PART - B

ಕ್ರ. ಸಂ./ Sl. No.	ಸಹ ಶೈಕ್ಷಣಿಕ ವಿಷಯಗಳು / CO-SCHOLASTIC SUBJECTS	ಶ್ರೇಣಿ / GRADE	ಕ್ರ. ಸಂ./ Sl. No.	ಸಹ ಶೈಕ್ಷಣಿಕ ವಿಷಯಗಳು / CO-SCHOLASTIC SUBJECTS	ಶ್ರೇಣಿ / GRADE
1.	ದೈಹಿಕ ಮತ್ತು ಆರೋಗ್ಯ ಶಿಕ್ಷಣ / PHYSICAL & HEALTH EDUCATION	A	2.	ಮನಃಶಾಸ್ತ್ರ ಮತ್ತು ಮೌಲ್ಯಗಳು / ATTITUDE & VALUES	A
3.	ಕಾರ್ಯಾನುಭವ / WORK EXPERIENCE	A	4.	ಕಲಾ ಶಿಕ್ಷಣ / ART EDUCATION	A

[illegible]

ಶಾಲಾ ಹೆಸರು ಮತ್ತು ವಿಳಾಸ / SCHOOL NAME AND ADDRESS :

HASSAN HASSAN DISTRICT 573201

ದಿನಾಂಕ/ DATE : 08-05-2023



ಅಧ್ಯಕ್ಷರು
Chairman

23344637