

District Legal Services Authority, Latehar

Data as to Rehabilitation under Victim Compensation Scheme

Period -4th Quarter (01-10-2022 to 31-12-2022)

(District including Sub Division)

Format-A

Sl. No.	Name of Court with full Designation	Name and address of victim with details of Case no. GR case No./ST case no./Comp. case no.(N.B: Name/Identity of Rape Victim and Victim Under POCSO Act and Juvenile not to be revealed)	Whether charge sheet/Final Form submitted (please specify the section Date of filling of charge sheet and date of taking cognizance)	Whether Compensation Qualified		Compensation paid		Whether Compensation paid by accused/appellant/convicted or State of Jharkhand	Whether interim or final Compensation paid in term of the order of the Hon'ble High Court or other Court's under (please Specify the case no. as well as the amount qualified or paid	Compensation Amount qualified but yet to be Paid	In brief, please specify the Rehabilitation Measure taken/ordered ten scheme of NALSA (specify name of the scheme under which benefit extended/number of beneficiaries Scheme wise	Whether Demand for fund made through DC, Please specify the letter No.
				Specify Interim Compensation qualified, with date	Specify Final Compensation qualified, with date	Specify Interim Compensation Paid, with date	Specify Final Compensation Paid, with date					
1	District & Addl. Sessions Judge-I, Latehar	Rape victim S.T. 182/2016	YES 376D of IPC 29-01-2020	----	---	----	-----	State	---	5,00,000/-	--	Vide letter no. 2153 dt 21/12/2022

Submitted

**Sd/-
Assistant**

**Sd/-
Secretary, DLSA, Latehar.**

District Legal Services Authority, Latehar

Data as to Rehabilitation under
Victim Compensation Under Jharkhand Welfare Fund Rules 2014
Period - 4th Quarter (01-10-2022 to 31-12-2022)

Format-B

Sl.No.	Name of Court with full Designation	Date of Conviction	Whether payment made to victim under Victim Welfare Fund Rules 2014 or not	Details of Victim wise Payment	Whether payment was made to Victim under the order of Hon'ble High court/Trail court/Appellate court/or payment was made when case was pending before the high court (please specify the Case No., Name of the Court, Date of order for payment of compensation)
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Submitted

**Sd/-
Assistant**

**Sd/-
Secretary, DLSA,Latehar.**

District Legal Services Authority, Latehar

Data as to Rehabilitation under
Rehabilitation of Victim Under SC/ST (Prevention of Atrocities) Act 1989
Period - 4th Quarter (01-10-2022 to 31-12-2022)

Format-C

Sl. No.	Name of Court with full Designation	Name and address of victim with details of Case no. GR case No./ST case no./Comp. case no.(N.B: Name/Identity of Rape Victim and Victim Under POCSO Act and Juvenile npt to be revealed	Whether charge sheet/Final Form submitted (please specify the section	Whether Compensation Qualified		Compensation paid		Whether Compensation paid by accused/appellant/convicted or State of Jharkhand	Whether interim or final Compensation paid in term of the order of the Hon'ble High Court or other Court's under (please Specify the case no. as well as the amount qualified or paid	Compensation Amount qualified but yet to be Paid	In brief, please specify the Rehabilitation Measure taken/ordered	Whether Sec 15A of the Act complied please specify the victim/witness protection measure
				Specify Interim Compensation qualified	Specify Final Compensation qualified	Specify Interim Compensation Paid	Specify Final Compensation Paid					
-	-	-	-	-	-	-	-	-	-	-	-	-

Submitted

**Sd/-
Assistant**

**Sd/-
Secretary, DLSA, Latehar.**

District Legal Services Authority, Latehar

Data as to Rehabilitation under

Rehabilitation of Victim Compensation Under Central scheme for assistance to Civilians Victim/Family of victim of terrorist /communal and naxal violence

Period - 4th Quarter (01-10-2022 to 31-12-2022)

Format-D

Sl.No.	Name of Court with full Designation	Name and address of victim with details of Case no. GR case No./ST case no./Comp. case no.(N.B: Name/Identity of Rape Victim and Victim Under POCSO Act and Juvenile not to be revealed	Whether charge sheet/Final Form submitted (please specify the section	Details of Rehabilitation Measure		Details of Compensation	
				Compensation Amount Paid	Govt. Job Provided	Compensation Amount yet to be Paid	Job yet to be Provided
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Submitted

**Sd/-
Assistant**

**Sd/-
Secretary, DLSA,Latehar.**