Letter no - 83/

From:

P.D.J-cum- Chairman D.L.S.A., Latehar

To,

The Member Secretary, JHALSA, Ranchi.

Sub:-

Regarding quarterly report on victim compensation in Format A to D.

Ref:-

Your goodself letter no. JHALSA/651 dt. 10-06-2020

Latehar: Dated: 06th Day of July, 2020.

Sir,

As directed, I am sending herewith desired information regarding quarterly report on victim compensation in Format A to D for the period from 01-04-2020 to 30-06-2020.

This is for your information & needful.

Encl- As above (04 Sheets)

Yours faithfully,

Totaley

P.D.J-cum- Chairman D.L.S.A., Latehar

06/07/2120

Data as to Rehabilitation under Victim Compensation Scheme Period - 2<sup>nd</sup> Quarter (01-04-2020 to 30-06-2020) (District including Sub Division)

### Format-A

Submitted

DLSA,Clerk

Secretary, 3.07.9.90

DLSA,Latehar.

Victim Compensation Under Jharkhand Welfare Fund Rules 2014 Period - 2<sup>nd</sup> Quarter (01-04-2020 to 30-06-2020) Data as to Rehabilitation under

## Format-B

	SI.NO.
1	Name of Court with full Designation
1	Date of Conviction
1	Whether payment made to victim under Victim Welfare Fund Rules 2014 or not
I	Details of Victim wise Payment
1	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)

Secretary, DLSA

DLSA,Latehar.

Submitted

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Data as to Rehabilitation under
Rehabilitation of Victim Under SC/ST (Prevention of Atrocities) Act 1989
Period - 2<sup>nd</sup> Quarter (01-04-2020 to 30-06-2020)

Format-C

No.		
of Court with	full Design ation	1
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 npot to be reveled	1
whether charge sheet/Final Form	submitted (please specify the section	
Whether Compensation Qualified	Specify Interim Compensa tion qualified	L
ther nsation ified	Specify Final Compens ation qualified	ī
Compen	Specify Interim Compens ation Paid	
Compensation paid	Specify Final Compensati on Paid	
Whether Compensatio n paid by	ellant/convic ted or State of Jharkhand	I
Whether interim or final	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		1
In brief, please specify the Rehabilitation	taken/ordered	
Whether Sec 15A of the Act complied please	victim/witness protection measure	

<u>B</u>

Submitted 2020

DLSA,Clerk

Secretary,
DLSA, 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 - 2<sup>nd</sup> Quarter (01-04-2020 to 30-06-2020)

Format-D

		SI.NO.	
		full Designation	
1	and Juvenile not to be revealed	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	
		Whether charge sheet/Final Form submitted (please specify the section	
:	Compensation Amount Paid	Details of Rehab	
	Govt. Job Provided	Details of Rehabilitation Measure	
1	Compensation Amount yet to be Paid	Details of Compensation	
1	Job yet to be Provided	pensation	

Submitted

Charles 2° 2°

OS CA 2° 2°

DLSA,Clerk

Secretary,

DLSA,Latehar.