Letter No. 954 /2020.

From:	
	Principal District & Sessions Judge,
	Cum-Chairman,
	District Legal Services Authority,
	Simdega.
To,	
	The Member Secretary,
	Jharkhand State Legal Services Authority,
	Ranchi
Sub:	Compliance of Order dated 14.03.2018 of the Hon'ble Court passed in A.B.A. No. 860/2017.
Ref.:	Your good-self office Ref. No. JHALSA/651 dated 10.06.2020,
	Simdega, Dated the 03 <sup>rd</sup> day of July, 2020.
Sir,	
	In response to the choice noted subject under reference. I are ferwarding berowith the require

In response to the above noted subject under reference, I am forwarding herewith the required

information in prescribed format in separate sheets.

This is for your good-self kind information and needful.

Sincerely yours, Sd/-Principal District & Sessions Judge, Cum-Chairman, District Legal Services Authority Simdega.

Encl: As above (04 sheets).

## Data as to Rehabilitation under Victim Compensation Scheme Period = $2^{nd}$ Quarter (01.04.2020 to 30.06.2020) (District including Sub Division)

Format-A

SI	Name of	Name and address of	Whether	Whether Compensation Quantified		Compensation paid		Whether	Whether interim or	Compensatio	In brief, please specify	
No.	Court with	the victims with	Charge		1		1	compensatio	Final Compensation	n amount	the Rehabilitation	
	Full	details of Case No.	sheet/Final	Specify interim	Specify Final	Specify	Specify Final	n paid by	paid in terms of the	quantified	Measure	
	Designation	G.R. Case No./ST	Form submitted	compensation	Compensation	Interim	Compensation	accused/app	order of the	but yet to be	taken/ordered	
		Case No./PS Case	(Please specify	quantified,	quantified, with	Compensatio	paid, with	ellant/convic	Hon'ble High Courts	paid	(09schemes of NALSA	
		No./Comp. Case No.	the sections,	with date	date	n Paid, with	date	t or State of	or other Court's		specify name of the	
		(N.B. Name /identify	date of filing of			date		Jharkhand	order )Please		scheme under which	
		of Rape Victim and	charge-sheet						specify the case no.		benefit	
		Victim under POCSO	and date of						as well as the		extended/number of	
		Act and Juvenile not	taking						amount quantified		beneficiaries scheme	
		to be revealed.	cognizance)						or paid.		wise)	

Sd/-

Office Clerk DLSA Simdega Sd/-

Secretary **DLSA Simdega** 

## Data as to Rehabilitation under Victim compensation under Jharkhand Victim Welfare Fund Rules 2014 **Period 2<sup>nd</sup> Quarter (01.04.2020 to 30.06.2020)**

Format-B

Sl. No.	Name of the court	Date of Conviction	Whether payment	Details of victim wise	Whether payment was
	with Full Designation		made to victim under	payment.	made to victim under
			Victim Welfare Fund		the order of Hon'ble
			Rules 2014 or not.		High Court/Trial
					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).
NIL	NIL	NIL	NIL	NIL	NIL

Sd/-

Office Clerk DLSA,Simdega Sd/-Secretary DLSA Simdega

## 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

	Torrite C										
SI	Name of	Name and	Whether	Whether Compensation		Compensation paid		Whether	Whether	Compensatio	In brief,
No.	Court	address of	Charge	Quantified				compensati	interim or	n amount	please
	with Full	the victims	sheet/Final	Specify	Specify Final	Specify	Specify	on paid by	Final	quantified	specify
	Designat	with details	Form	interim	Compensati	Interim	Final	accused/ap	Compensat	but yet to be	the
	ion	of Case No.	submitted	compensat	on	Compens	Compensa	pellant/conv	ion paid in	paid	Rehabilita
		G.R. Case	(Please	ion	quantified.	ation	tion paid.	ict or State	terms of		tion
		No./ST Case	specify the	quantified.		Paid.		of	the order		Measure
		No./PS Case	sections)					Jharkhand	of the		taken/ord
		No./Comp.							Hon'ble		ered
		Case No.							High Courts		
		(N.B. Name							or other		
		/identify of							Court's		
		Rape Victim							order		
		and Victim							(Please		
		under POCSO							specify the		
		Act and							case no. as		
		Juvenile not							well as the		
		to be							amount		
		revealed.							quantified		
									or paid.		
NIL	NIL	NIL	NIL	NIL	NIL	NIL	NIL	NIL	NIL	NIL	NIL

Sd/-Office Clerk DLSA Simdega Sd/-Secretary DLSA Simdega

## Data as to Rehabilitation under

Rehabilitation of Victim under Central Scheme for assistance to Civilians victim/Family of Victims of Terrorist/Communal and naxal

violence **Period = 2<sup>nd</sup> Quarter (01.04.2020 to 30.06.2020)** 

Format-D

SI. NO.	Name of court	Name and	Whether					
SI. NO.	Name and with Fulladdress of the victims with details of case No. G.R. Case No./ST Case No./P.S. Case No./Comp. Case No. (B.B. Name/identify of Rape Victim and Victim under POCSO Act and		Charge- sheet/Final Form submitted (Please specify the sections)	Details of Rehabilit	tation Measure	Details of Compensation		
		Juvenile not to be revealed.		CompensationGovt. Jobamount paid.provided		Compensation amount yet to be paid	Job yet to be provided	
NIL	NIL	NIL	NIL	NIL	NIL	NIL	NIL	

Sd/-Office Clerk DLSA Simdega Sd/-Secretary DLSA Simdega