

FORM II
[(See rule 4(1))]

PART A

1.	Name of the Member (in block letters)	SHRI PENUMALLI MADHU
2.	Father's name	Shri P. D. Rami Reddy
3.	Permanent address	Susrutha Peoples Hospital, New Town Mahabob Nagar, A.P.
4.	Delhi address	6, Dr. Rajendra Prasad Road, New Delhi
5.	Details of immovable properties with value	Nil
6.	Details of movable properties with value	Nil
7.	Details of liabilities	Nil
8.	Remarks	—

PART B

1.	Name of the Member's spouse (in block letters)	SMT. VALLIPALLI SUMATHI	
2.	Permanent address	Susrutha Peoples Hospital, New Town Mahabob Nagar, A.P.	
3.	Delhi address	6, Dr. Rajendra Prasad Road, New Delhi	
4.	Details of immovable properties with value	House in Hyderabad	Rs.30,00,000/-
5.	Details of movable properties with value	Savings	—
6.	Remarks	—	—

PART C

1.	Name of the Member's dependent children (in block letters)	NIL
2.	Permanent address	Not applicable
3.	Delhi address	
4.	Details of immovable properties with value	

5.	Details of movable properties with value	Not applicable
6.	Remarks	