Letter No. 18 /2019.

From:

Principal District & Sessions Judge,

Cum-Chairman,

District Legal Services Authority,

Simdega.

To,

The Learned 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/2631 dated 12.12.2018.

Simdega, Dated the 04th day of January, 2019.

Sir,

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.

Yours faithfully,

Principal District & Sessions Judge, Cum-Chairman, District Legal Services Authority, Simdega.

Encl: As above (05 sheets).

Data as to Rehabilitation under Victim Compensation Scheme

Period = 4th Quarter (01.10.2018 to 31.12.2018)

(District including Sub Division)

Compensation paid

Whet

Whether

Com

In brief,

Whether

Format-A

Whether Compensation

Name of

Name and address

Whether

A		1		· - · · · · · · · · · · ·		1	1	1		1	
Court with Full Designati	of the victims with details of Case No. G.R. Case No./ST	Charge sheet/Final Form	Quantified	T. S			her comp ensati	interim or Final Compensati	pens ation amo	please specify the Rehabilitatio	demand for fund made
on		submitted (Please specify the sections, date of filing of charge- sheet and date of taking cognizance)	Specify interim compensatio n quantified, with date	Specify Final Compens ation quantifie d, with date	Specify Interim Compensatio n Paid, with date	Specify Final Compensatio n paid, with date	on paid by accus ed/ap pellan t/conv ict or State of Jharkh and	on paid in terms of the order of the Hon'ble High Courts or other Court's order Please specify the case no. as well as the amount quantified or paid.	unt quan tified but yet to be paid	n Measure taken/ordere d (09schemes of NALSA specify name of the scheme under which benefit extended/nu mber of beneficiaries scheme wise)	specify the letter no.
Court of Addl. Sessions Judge, Cum- Spl. Judge POCSO Simdega	Simdega Mahila P.S. 07/17, G.R. 158/17, Spl. POCSO No. 05/17,	Charge Sheet No. 05/17 Dt. 30.04.17, U/s 366, 153A, 376 IPC & 4 POCSO Act and cognizance taken on 07.06.2017	13.03.2018		3,00,000=00 dt. 06.11.18		State of Jharkh and				

Court of	Simdega P.S.	Charge	13.03.2018		2,00,000=00		State	 	
Addl.	33/17, G.R. 139/17,	Sheet No.			Dt. 06.11.18	The state of the s	of		
Sessions	Spl. POCSO 04/17	43/17 Dt.) 		Jharkh		
Judge,		30.04.17					and		
Cum- Spl.		and							
Judge		cognizance	The state of the s						
POCSO		taken on							
Simdega		17.05.2017		777					
		U/s 354(A),							
		506 IPC &							
		8/10/12 of							
		POCSO Act							

DLSA Simdega

I/C Head Clerk DLSA Simdega

Data as to Rehabilitation under Victim compensation under Jharkhand Victim Welfare Fund Rules 2014

Period = 4th Quarter (01.10.2018 to 31.12.2018)

Format-B

Name of the 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/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	N.A

LSA Simdega

I/C Head Clerk DLSA Simdega

Data as to Rehabilitation under

Rehabilitation of victim under SC/ST (Prevention of Atrocities) Act 1989 $Period = 4^{th}$ Quarter (01.10.2018 to 31.12.2018)

Format-C

Name of Name and Court address of		Whether Charge	Whether Compensation Quantified		Compensation paid		Whether compensati	Whether interim or	Compensatio n amount	In brief, please	Whether Section 15A
with Full Designat ion	the victims with details of Case No. G.R. Case No./ST Case No./PS Case No./Comp. Case No. (N.B. Name /identify of Rape Victim and Victim under POCSO Act and Juvenile not to be revealed.	sheet/Final Form submitted (Please specify the sections)	Specify interim compensat ion quantified.	Specify Final Compensati on quantified.	Specify Interim Compens ation Paid.	Specify Final Compensa tion paid.	on paid by accused/ap pellant/convict or State of Jharkhand	Final Compensat ion paid in terms of the order of the Hon'ble High Courts or other Court's order (Please specify the case no. as well as the amount quantified	quantified but yet to be paid	specify the Rehabilita tion Measure taken/ord ered	of the Act complied, please specify the victim/witnes s protection measure
NIL	NIL	NIL	NIL	NIL	NIL	NIL	NIL	or paid. NIL	NIL	NIL	NIL

O/C DLSA Simdega

I/C Head Clerk 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 $Period = 4^{th}$ Quarter (01.10.2018 to 31.12.2018)

Format-D

Name of court with Full Designation	Name and address of the victims with details of case No. G.R. Case No./ST Case No./Comp. Case No./Comp. Case No. (B.B. Name/identify of Rape Victim and Victim under POCSO Act and Juvenile not to be revealed.	Whether Charge- sheet/Final Form submitted (Please specify the sections)	Details of Rehabilita	tion Measure	Details of Compensation		
			Compensation amount paid.	Govt. Job provided	Compensation amount yet to be paid	Job yet to be provided	
	NIL						

O/C NCN DLSA Simdega

I/C Head Clerk
DLSA Simdega