



ངན་ལྷན་བཀག་སྡོམ་ལྷན་ཚོགས།
ACC
 ANTI-CORRUPTION COMMISSION

GIFT DISCLOSURE FORM
 Anti-Corruption Commission
 Thimphu

Gift Recipient Information

Name of the gift recipient (public servant, spouse and/or dependent):

Relationship to the public servant (if gift receiver is spouse and/or dependent):

Designation of the recipient public servant:

Agency of the recipient public servant:

Address:

Phone:

Gift Information

Description of the gift:

Value of the gift (based on a receipt or the estimated fair market value):

Date of receipt of the gift:

Gift Giver's Information

Name of the gift giver:

Designation:

Agency:

Address:

Phone:



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Gift Acceptance Circumstances (*Please provide circumstances justifying the gift acceptances*):

.....

Retention or Disposal of Gift

(1) Gift will be retained/used by the recipient.

Date of Return:

(2) In accordance with Rule 33 (b) of the Gift Rules, the gift has been returned to the giver. (*Please attach the receipt or acknowledgment of the deposit*)

Date of Return:

(3) In accordance with Rule 33 (c) of the Gift Rules, gift from foreign source is disposed off in accordance with the procedures in force for disposal of government properties.

(4) In accordance with Rule 33 (d) of the Gift Rules, the gift from foreign government is used for official purposes or disposed off in accordance with the procedures in force for disposal of government properties.

Name of organization:

Address:

Date of Deposit:

(*Please attach the receipt or acknowledgment of the deposit*)



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Affidavit

I affirm that all the information that I have written in this form is true, correct and complete to the best of my knowledge, information and belief. I understand that I am liable for penalty under the Gift Rules if I have knowingly hidden or falsely disclosed the gift.

.....
(Signature of the Recipient)

.....
(Date)

I have determined that this gift is appropriate for use/retention/return in accordance with the Gift Rules and that this gift was not solicited by the recipient.

.....
(Name and Signature of the Head of Agency)

.....
(Date)

In the case of the HoA

.....
(Name and Signature of the Committee Chair)

.....
(Date)