



ଦ୍ୱାସାମନ୍ତରୀୟ ଶକ୍ତିମାଣ ପୁନଃସ୍ଥାପନାମର୍ତ୍ତମାଣିକ୍ଷଣମାତ୍ରାମାତ୍ରା॥

Human Resource Division  
Ministry of Energy and Natural Resources  
Royal Government of Bhutan  
Thimphu: Bhutan

**BHUTAN**  
Believe

## GIFT DISCLOSURE FORM

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### Gift Recipient Information

Name: .....

Position Title: .....

EID No.: .....

Department/Division: .....

Address: .....

Phone: .....

### Gift Information

Description of the gift: .....

  
  
  
  
  
  

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

Date of receipt of the gift: .....

### Gift Giver's Information

Name: .....

Designation: .....

Agency: .....

Relationship: .....

Address: .....

Phone: .....

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

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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.

Date:

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(Signature of the Recipient)