

to the Universities and it is for their Boards of Studies to take action on the recommendations of the committees.

Universities are autonomous bodies and have their own Boards of Studies to deal with the courses of study. While the core of knowledge included in different courses should be consistent with modern demands of development in different subjects, universities should be free to prescribe their own curricula, and it would be difficult to insist that the courses should be uniform in all universities, as it will be harmful to the ideas of experimentation and progress.

Communist Activity in Darjeeling

295. { Shrimati Tarkeshwari Sinha:
Shri Surendra Pal Singh:
Shri Tan Singh:

Will the Minister of Home Affairs be pleased to state:

(a) whether his attention has been drawn to the Press reports that Darjeeling is threatened with infiltration of Communists owing allegiance to China;

(b) whether a vicious whispering campaign has been started by them that 'the Red Liberation Army is coming from China'; and

(c) if so, the action Government propose to take in the matter?

The Minister of State in the Ministry of Home Affairs (Shri Hathl): (a) and (b). Press reports to this effect came to the notice of Government and were found to be grossly exaggerated.

(c) All possible steps have been taken and are being taken to combat activities prejudicial to the defence of India, public safety and maintenance of public order.

12 hrs.

RE CALLING ATTENTION NOTICE (Query)

श्री श्रीकार लाल बेरवा (कोटा) :
प्रध्यक्ष महोदय, मैं ने एक ध्यानाकर्षण प्रस्ताव का नोटिस दिया है ।

प्रध्यक्ष महोदय : प्रार्थर, प्रार्थर ।

श्री श्रीकार लाल बेरवा: उसमें कहा गया है कि राजस्थान के कई जिलों में भ्रमरीका के सड़े गेहूं का दूषित आटा खाने से हैजा और दूसरी बीमारियां फैली हुई हैं और लगभग 200 भ्रादमी मर गये हैं ।

प्रध्यक्ष महोदय : माननीय सदस्य बैठ जायें ।

12.01 hrs.

CALLING ATTENTION TO MATTER OF URGENT PUBLIC IMPORTANCE

REPORTED THREAT OF RESIGNATION BY
DOCTORS OF CENTRAL GOVERNMENT HEALTH SCHEME

श्री मधु लिमये (मुंजर) : प्रध्यक्ष महोदय, मैं अविलम्बनीय लोक महत्त्व के निम्नलिखित विषय की और स्वास्थ्य मंत्री का ध्यान दिलाता हूँ और प्रार्थना करता हूँ कि वह इस बारे में एक वक्तव्य दें :—

“केन्द्रीय सरकार स्वास्थ्य योजना के डाक्टरों द्वारा त्याग-पत्र दिये जाने की घमकी के समाचार ।”

The Deputy Minister in the Ministry of Health (Shri P. S. Naskar): The Statement consists of three typed pages. May I seek your permission to read it in English?

Mr. Speaker: Would it be all right . . .

श्री हुकम चन्द्र कछवाय (देवास) :
 अध्यक्ष महोदय, यह बहुत महत्व का विषय है। हम चाहते हैं कि मंत्री महोदय का वक्तव्य सदन में पढ़ा जाये। इस में ज्यादा से ज्यादा पन्द्रह मिनट लगेये।

अध्यक्ष महोदय : वह स्टेटमेंट माननीय सदस्यों के सामने आ जायेगा और वे उसको पढ़ कर बाद में सवाल कर सकते हैं।

श्री हुकम चन्द्र कछवाय : मेरा ब्यवस्था का प्रश्न है। यह महत्व का विषय है। इसको हाउस में पढ़ना चाहिये।

श्री रामेश्वरानन्द (करनाल) : अध्यक्ष महोदय, इसको हिन्दी में पढ़ा जाये।

Mr. Speaker: This can be read in English.

Shri P. S. Naskar: In reply to a Calling Attention Notice about the observance of a protest week by a large number of doctors working under the Central Government Health Scheme, a statement was made in the Lok Sabha on the 2nd March, 1965. In pursuance of the assurance that the grievances of the medical officers would receive very careful and early consideration the various issues involved were considered and orders issued in this Ministry's Office Memorandum No. F. 5 (I)-1/65-CHS, dated the 30th June, 1965 (copy is laid on the Table of the Sabha,—Statement I) regarding the revised scales of pay and the revised structure of the Service. Broadly speaking the reorganised Service will be divided into two classes, namely general duty doctors and specialists. The General Duty Medical Officers will be in Class II as well as as in Class I. The Specialist Grade Officers and Super-time scale officers will be in Class I.

Class II Service will consist of (1) General Duty Licentiate Medical Officers with a scale of pay Rs. 350—15

—380—20—500—EB—20—600 and (ii) General Duty Graduate Medical Officers (Class II-A) with a scale of pay of Rs. 350—25—500—30—590—EB—30—830—35—900. The minimum qualification for entry to Class II-B of the Service i.e. General Duty Licentiate Medical Officers will be the possession of a Licentiate medical qualification and five years experience and the minimum qualification for entry to Class II-A i.e. General Duty Graduate Medical Officers will be the possession of graduate medical qualification registered with the Medical Council of India. The medical graduates after completing the rotating internship will be eligible for appointment to this category and will be eligible for promotion to Class I Service. A suitable share of the vacancies in Class II-A will be reserved to be filled by promotion of the outstanding members of Class II-B.

The minimum qualification for entry to Class I category of General Duty doctors, which will carry pay in the scale of Rs. 450—30—660—EB—40—1100—50—1250, shall be 5 years' experience after registration as a medical graduate. Medical graduates who obtain a post-graduate diploma qualification will be given two advance increments and those who obtain post-graduate degree qualification will be given four advance increments in this scale: The strength of Class I and Class II-A shall be adjusted in such a manner that posts in Class I Service shall be filled by promotion of officers who have put in 5 years' service in Class II-A and are considered suitable for appointment to Class I on the basis of their record and a qualifying test. The remaining vacancies, if any, will be filled by recruitment through the Union Public Service Commission.

There shall be a 'Specialist' Grade carrying pay in the scale of Rs. 600—40—1000—EB—50—1300. The minimum qualification for entry to this category will be the possession of a

[Shri P. S. Naskar]

post-graduate degree qualification with at least three years' standing in the profession in a responsible position connected with the speciality or post-graduate diploma qualification with at least five years' standing in the profession with three years' work in a responsible position connected with the speciality.

The 'Supertime Scale' posts will carry the scales of (i) Rs. 1300—60—1600—100—1800, and (ii) Rs. 1800—100—2000—125—2250, in addition to the posts of Director-General of Health Services and Addl. D.G.H.S. 50 per cent of the vacancies in the supertime scale I (Rs. 1300—1800) will be filled by promotion of officers working in the Specialists' Grade. Some of the General Duty Doctors (Class I) may also be promoted to this grade. The remaining 50 per cent of the vacancies will be filled by recruitment through the Union Public Service Commission for which the C.H.S. doctors too will be free to apply. All vacancies in the Supertime scale II (Rs. 1800—2250) will be filled by promotion of suitable officers holding posts in the supertime Scale I (Rs. 1300—1800).

Persons appointed to the Service shall not be allowed private practice of any kind. Those appointed to Class I of the Service shall be entitled to non-practising allowance at the rate of 50 per cent of pay subject to a maximum of Rs. 600/- p.m. Those appointed to Class II of the Service will be granted n.p.a. at 33 1/3 per cent subject to a minimum of Rs. 150/- p.m.

The revised scales of pay and non-practising allowance will be granted with effect from the 1st July, 1965.

Steps are being taken to amend the Central Health Service Rules to give effect to the above mentioned decisions as well as to reorganise the

structure of the Service and to provide for other cognate matters. A comparative statement showing the scale of pay prescribed for the I.A.S., the Central Engineering Service and the C.H.S. (both existing and revised) is also laid on the table of the Sabha—Statement II.

All medical officers who have been appointed to the Central Health Service already or those who have been selected for appointment to the Service against future maintenance vacancies have been asked to elect in writing for the pay and allowances as sanctioned in the Ministry of Health O.M. dated the 30th June, 1965. About 500 officers have already opted for the revised scales of pay so far. The last date for exercising options was the 13th August, 1965, but it has been extended in the case of officers posted at distant places, and for those who have asked for extension of time. The options are being received through the Heads of Departments.

No letters of resignations have been received by the Ministry of Health.

Statement—1

No. F. 5(I)—1/65-CHS

GOVERNMENT OF INDIA

Ministry of Health

New Delhi-1, the 30th June, 1965.

OFFICE MEMORANDUM

Subject:—Central Health Service—
Revision of scales of pay &
re-organisation of the Service.

The Government of India have had under consideration for some time the question of reorganisation and revision of the pay scales of the Central Health Service with a view to rationalising the structure of the Ser-

vice and the pay scales and have been placed to take the following decisions:—

1. The Service shall be divided into two classes, namely, Class I and Class II and will consist of the following categories of officers:—

- i. General Duty Medical Officers.
- ii. Specialists Grade Officers.
- iii. Super-time scale Officers.

The General Duty Medical Officers will be in Class II as well as in Class I. The Specialist grade officers and super-time scale officers will be in Class I.

2. Class II Service will consist of (i) General Duty Licentiate Medical Officers (Class II-B) with a scale of pay of Rs. 350—15—380—20—500—EB—20—600 and (ii) General Duty Graduate Medical Officers (Class II-A) with a scale of pay of Rs. 350—25—500—30—590—EB—30—830—35—900. The minimum qualification for entry to Class II-B of the Service, i.e., General Duty Licentiate Medical Officers, will be the possession of a Licentiate medical qualification included in Part I of the Third Schedule to the India Medical Council Act, 1956 and five years experience. The minimum qualification for entry to Class II-A, i.e. General Duty Graduate Medical Officers, will be the possession of a medical qualification included in the first or the second schedule or Part II of the third schedule (other than licentiate qualification) to the Indian Medical Council Act, 1956. The holders of medical qualifications included in Part II of the third schedule should fulfil the conditions stipulated in section 13(3) of the Indian Medical Council Act, 1956. The medical graduate after completing the rotating internship are eligible for appointment to this category. A suitable share of the vacancies in Class II-A will, however, be reserved to be filled up by promotion of the outstanding members of Class II-B.

3. The minimum qualification for entry to Class I category of General Duty Medical Officers, which will carry pay in the scale of Rs. 450—30—660—EB—40—1100—50—1250, shall be 5 years' experience after registration as a medical graduate. Medical graduates who possess a post-graduate diploma qualification will be given two advance increments and those who possess post-graduate degree qualification will be given four advance increments in this scale (viz. Rs. 450—30—660—EB—40—1100—50—1250). The strength of Class I and Class II-A shall be adjusted in such a manner that posts in Class I Service shall be filled by promotion of officers who have put in 5 years' service in Class II-A and are considered suitable for appointment to Class I on the basis of their record and a qualifying test. The remaining vacancies, if any, will be filled by recruitment through the Union Public Service Commission.

4. There shall be a specialists grade carrying pay in the scale of Rs. 600—40—1000—EB—50—1300. The minimum qualification for recruitment to this category will be the possession of a post-graduate degree qualification with at least three years' standing in the profession in a responsible position connected with the speciality or post-graduate diploma qualification with at least five years' standing in the profession and with three years work in a responsible position connected with the speciality.

5. The super-time scale posts will carry the scales of (i) Rs. 1300—60—1800—100—1800 and (ii) Rs. 1880—100—2000—125—2250 in addition to the pay fixed for the posts of Director-General of Health Services and Addl. Director-General of Health Services. 50 per cent of the vacancies in the super-time scale of Rs. 1300—1800 will be filled by promotion of officers working in the Specialist grades. Some of the General Duty doctors (Class I) may also be promoted to this grade. The remaining 50 per cent of the vacancies will be filled by recruitment

through the Union Public Service Commission. All vacancies in the Supertime scale of Rs. 1800—2250 will be filled by promotion of suitable officers holding posts in the supertime scale of Rs. 1300—1800.

6. Persons appointed to the Service shall not be allowed private practice of any kind whatsoever, including consultant and laboratory practice. Those appointed to Class I of the Service shall be entitled to non-practising allowance at the rate of 50 per cent of pay subject to a maximum of Rs. 600/- p.m. Those appointed to Class II of the Service will be granted non-practising allowance at 33 1/3 per cent subject to a minimum of Rs. 150/- p.m.

7. The revised scales of pay and n.p.a. will take effect from the 1st July, 1965.

8. Steps are being taken to amend the Central Health Service Rules to give effect to the above mentioned decision as well as to re-organise the structure of the Service and to provide for other cognate matters.

P. V. HARIHARASANKARAN,
Under Secretary to the Govt.
of India.

To

All Participating Ministries/Depts
Union Territories

D.G.H.S.

STATEMENT II

Comparative statement showing the scales of pay prescribed for I.A.S., Engineering services under the C.P.E.D. and the Central Health Service.

S. No.	I.A.S.	Central Health Service		
		Engineers	Existing.	Revised.
1	2	3	4	5
1	Junior scale Rs. 400—500—40—700— E.B.—30—1000	Asstt. Engineer. Rs. 350—35—500—30—590— E.B.—30—800—E.B.—30— 830—35—900	Class II Rs. 325—25—500—30—590—E.B.— 30—800—plus N.P.A. at 25% of pay subject to a minimum of Rs. 150/-, i.e. Rs. 475—1000.	Class II (a) For Medical Graduates Rs. 350—25—500—30—590—E.B.— 30—830—35—900 + N.P.A. @ 33½% subject to a minimum of Rs. 150/- p.m., i.e. Rs. 500/- to Rs. 1200/-.
		Asstt. Executive Engrs. Rs. 400—400—450—30—600— 35—670—E.B.—35—950.		Class II (b) For medical licentiates Rs. 350—15—380—20—500—E.B.— 20—600— plus N.P.A. @ 33½% subject to a minimum of Rs. 150/- p.m., i.e. Rs. 500 to 800.

श्री मधु लिमये : अध्यक्ष महोदय, यह जो डाक्टरों का मामला है, उस को लेकर काफ़ी असन्तोष पैदा हुआ है और मुझको बताया गया है कि 600 डाक्टरों ने करीब करीब इस्तीफा देने का फैसला किया है। सनातकीय परीक्षा पास करने के बाद फ़ौजी वैद्य की सेवा या इंजीनियरी की सेवा या आई० ए० एस० की सेवा में भरती हुए लोगों के लिए जो तन्द्वाह है, उस में और भी जो योजना मंत्री महोदय ने हमारे सामने रखी है, उसमें काफ़ी फ़र्क है। इन्होंने जो वर्गीकरण वगैरह बनाया है उससे काफ़ी असन्तोष पैदा हुआ है। इसलिए मैं जानना चाहता हूँ कि क्या इस योजना पर पुनर्विचार करके जैसे फ़ौजी वैद्यकीय सेवा या इंजीनियरी सेवा या आई० ए० एस० की सेवा में जैसी तन्द्वाह दी जाती है, क्या इन डाक्टरों के लिए भी एक ही श्रेणी, यानि प्रथम श्रेणी बना कर उनको यह तन्द्वाह दी जाएगी ?

Shri P. S. Naskar: I gave a very detailed statement.....

Mr. Speaker: Whether Government would reconsider the matter and bring up the scale on par with that of the medical services in the armed forces or the IAS or the engineering services?

Shri P. S. Naskar: The answer is that Government have considered all these points and the revised scales that have been announced indicate Government's decision in the matter.

श्री मधु लिमये : एक छोटा सा सवाल और . . .

अध्यक्ष महोदय : नहीं ।

श्री मधु लिमये : नाम बहुत कम हैं और आप मुझे एक छोटा सा सवाल करने की आज्ञा दे सकते हैं ।

अध्यक्ष महोदय : जी नहीं ।

श्री हुकम चन्द कछवाय : डाक्टरों ने जो त्यागपत्र दिये हैं . . .

अध्यक्ष महोदय : वे कहते हैं नहीं दिये हैं ।

श्री हुकम चन्द कछवाय : दिये हैं, यह मैं आपको बतलाता हूँ । 30-6-65 को 404 डाक्टरों ने इस्तीफे दिये और 9-7-65 को 125 ने और 12-8-65 को 74 ने दिये हैं । इन लोगों ने मंत्री महोदय से मिलने की तीन बार कोशिश की है, 12 14 और 15 अगस्त को, लेकिन उन्होंने उनसे मिलने से इन्कार किया है । यह मसला पिछली बार इस सदन में 2-3-65 को प्रायाश और उस वक्त नन्दा जी ने बीच में छेड़ते हुए कहा था कि वह स्वयं इसको देखेंगे । यह झगड़ा पिछले कई महीनों से चला आ रहा है और डाक्टरों में बहुत भारी असन्तोष है । इस बात को लेकर भी असन्तोष है कि जो ज्यादा मेहनत करते हैं उनको कम तन्द्वाह मिलती है और जो कम मेहनत करते हैं उनको ज्यादा तन्द्वाह मिलती है । इस झगड़े को सुलझाने के लिए क्या सरकार ने उनसे बातचीत की है या करने का विचार है ?

Shri P. S. Naskar: As I mentioned in my original reply—perhaps I could not make myself sufficiently clear to the hon. Member—a statement was made in this House on the 2nd March. After that, the whole matter was examined. All the views of the doctors were taken into account and the decision that Government have taken has been read out by me just now.

श्री हुकम चन्द कछवाय : 650 लोगों ने इन्फ्री दिये हैं

अध्यक्ष महोदय : इसके बाद ये रिवाइज हुए हैं ।

श्री हुकम चन्द कछवाय : सरकार ने उनके प्रतिनिधियों से मिलने से इन्कार किया है और

अध्यक्ष महोदय : वे कहते हैं कि उसके बाद सब जो स्केल वे रिवाइज हुए हैं ।

श्री बड़े (खारगोन) : मिलना चाहते हैं या नहीं ?

श्री हुकम चन्द कछवाय : सेक्रेटरी ने मना कर दिया था । सरकार ने साफ कहा है कि मिलना नहीं चाहते हैं । सरकार क्यों उनके प्रतिनिधियों से मिलना नहीं चाहती है ?

Shri P. S. Naskar: They are government officers. There is a proper channel through which they could make representation. The Director General of Health Services, the Secretary and everybody in the Ministry is available for consultation and to meet their representation.

श्री हुकम चन्द कछवाय : मेरा एक व्यवस्था का प्रश्न है । 2-3-65 को नन्दा जी ने स्वयं कहा था कि वे सारे मामले को देखेंगे और जल्दी इसका निबटारा करेंगे । मैं नन्दा जी से जानना चाहता हूँ कि उन्होंने क्या किया है इस मामले में अब तक !

अध्यक्ष महोदय : नन्दा साहब से नहीं पूछ रहे हैं इस वक्त ।

Shrimati Savitri Nigam (Banda): According to the statement made by the hon. Minister, the Health Ministry has tried to fulfil the assurance

given in this House. But still there is great confusion, dissatisfaction and disgust prevailing amongst the doctors. May I know from him what are the reasons why the doctors are so disgusted that they have given an open challenge saying they are going to resign? I would also like to know whether . . .

Mr. Speaker: The reason is very simple. They want more. What else?

Shrimati Savitri Nigam: I would like to know whether it is a fact or not that because of this confusion created by the Health Ministry and because of the scheme, the net result is that people of the higher grade have benefited to a great extent but people of the lower grade have suffered all the more. I want a categorical answer.

Shri P. S. Naskar: Nobody has suffered more; nobody has benefited more. If the hon. Member will kindly look into the scales of pay, everybody has been benefited.

Shri S. M. Banerjee (Kanpur): On 18th March, at the instance of a senior Member of this House who is a doctor, the hon. Health Minister met the representatives of the Doctors' Joint Action Council and gave eight assurances. I find that after the introduction of the new pay scales and other service conditions, none of those assurances has been fulfilled, and that is one of the causes which is leading to this agitation. I want to know why Government deviated from their assurances, whether this was due to financial difficulties, and whether it is a fact that out of more than Rs. 1 crore which is likely to be spent on these new pay scales, 80 to 90 per cent goes to those who are getting more than Rs. 1,000 and only the rest is going to the lower doctors.

Shri P. S. Naskar: There is no such Government assurance of 8 or 9 points as the hon. Member mentioned. There may have been private discussions between the hon. Minister and the doctors, but no assurance was given. The only thing that was said on the floor of the House was on 2nd March, namely that the whole pay structure and other allied things were being considered. After full consideration, Government has announced the decision in their memorandum of the 30th June, as I mentioned in my reply. As for the other point about 80 per cent going to the top people, it is a matter of opinion, but the facts are different.

Shri S. M. Banerjee: On a point of order. My point of order is this. What I said was that on 18th March, at the intervention or instance of a senior Member of this House, Dr. C. B. Singh, the hon. Minister met the members of the Joint Action Council and 8 assurances had been given. I have got all of them in writing here, and he cannot deny them. I never said that it was in the House. But an assurance was given in the House by the Home Minister that he would intervene, and also by the hon. Minister that she would do her best. Let him reply whether the assurances were given by the hon. Minister, whether in a private or a public meeting, to the doctors who came in a deputation to meet her, and whether they were not fulfilled. I have here the assurances in writing. Let him answer that.

Mr. Speaker: Does he want information, or is it a point of order?

Shri S. M. Banerjee: My point of order is . . .

Mr. Speaker: What does he want? Which rule has been violated that I should exercise my judgment?

Shri S. M. Banerjee: I am reading all the rules, and after a month or

so, I will be able to quote. Certainly you should realise our difficulties.

Mr. Speaker: There is no point of order. Shri Banerjee is an old parliamentarian, and he knows it best that there is no point of order.

Shri S. M. Banerjee: He is evading the question.

Dr. L. M. Singhvi (Jodhpur): On a point of order. The question has been put in respect of two assurances given, one by the Health Minister and another by the Home Minister, one in respect of talking to the representatives of the doctors' association and the other in respect of the intervention of the Home Minister. The question related to whether the Government have tried to fulfil these assurances. That question has not been answered. That question must be answered.

Shri Vidya Charan Shukla (Mahasamund): There is no point of order in this.

Shri P. S. Naskar: I started by saying that this assurance was given in this House, that the matter would be looked into. That was on 2nd March. About this private discussion, do you consider it an assurance? As a trade union leader, my hon. friend Shri Banerjee knows what a discussion is and what an assurance is.

Shri S. M. Banerjee: It is the patients who are suffering. Kindly ask the Minister to reply.

श्री मधु लिमये : दूसरे प्रश्न का भी जवाब नहीं पाया है ।

अध्यक्ष महोदय : नहीं पाया है तो सब रह गया है ।

श्री मधु लिमये : एक करोड़ रुपये कुल खर्च होगा, यह कहा गया है । मैं जानना चाहता हूँ कि भिन्न वर्गों पर कितना होगा ।

श्री हुकम चन्द कछवाय : मेरे प्रश्न का उत्तर नहीं आया है ।

अध्यक्ष महोदय : प्रश्न रह गया है ।

श्री हुकम चन्द कछवाय : नन्दा जी ने आश्वासन दिया था । मैं जानना चाहता हूँ कि उन्होंने क्या कदम उठाया है उस आश्वासन को पूरा करने के लिए ।

अध्यक्ष महोदय : मैं इजाजत नहीं दे रहा हूँ, आप कैसे पूछेंगे ।

श्री हुकम चन्द कछवाय : यह जवाब तो दिलाया जाए ।

अध्यक्ष महोदय : वह खत्म हुआ लेकिन फिर भी आप बार बार खड़े हो रहे हैं ।

12.20 hrs.

QUESTION OF PRIVILEGE

WRIT PETITION BY SHRI MADHU LIMAYE BEFORE CIRCUIT BENCH OF PUNJAB HIGH COURT.

Mr. Speaker: There was a notice of question of privilege by Shri Vidya Charan Shukla, Shri A. S. Saigal and others regarding the writ petition by Shri Madhu Limaye before the Circuit Bench of the Punjab High Court. I had kept it pending because then the case was before the Court. Shri Shukla might briefly say what he wants to.

Shri Vidya Charan Shukla (Mahasamund): Sir, I had given this notice of privilege motion on 10th May and as you have said this was held over until the Court gave the decision on the writ petition. As you will remember, the hon. Member Mr. Madhu Limaye made allegations of *mala fides* on the presiding officer of this

hon. House in a writ petition and that is the most objectionable part on which I have based my privilege motion. I also requested that this motion be referred to the Privileges Committee for its decision. But may I say that if the hon. Member is prepared to offer an unconditional apology to this House then this matter may not be referred to the privileges committee and the House may consider whether that apology can be accepted or not.

श्री मधु लिमये (मुंजेर) : अध्यक्ष महोदय, श्री शुक्ल ने जो प्रस्ताव रखा है उसको पहले उनको पढ़ना चाहिये था ताकि सदन को पता चलता कि क्या प्रस्ताव है । इसलिये मैं उनसे विनती करता हूँ कि पहले उन्होंने जो पत्र आपको लिखा है उसे वे पूरा पढ़ें । उसके बाद मुझे जो कहना है उसे कहूंगा ।

Mr. Speaker: He may read out the notice.

Shri Vidya Charan Shukla: The notice is as follows:

"I wish to move in this House a Privilege Motion against Shri Madhu Limaye, M.P. and Mr. Justice Grover and Mr. Justice S. K. Kapoor for having committed breach of privilege of Lok Sabha."

These two judges are now out because . . .

Mr. Speaker: The notice may be read.

Shri Vidya Charan Shukla: I am reading the entire notice.

"The day-to-day working of the House and the Rules of Procedure and Conduct of Business of the House are sought to be nullified and made ineffective