

Place			
Date		Signature (or thumb-impression if illiterate) and name of Pensioner.	
Witness: Signature:		Name & address :	
Name & address :		Signature of Head of Office/Stamp :	
Acknowledgement to be sent by the Head of Office. Certified that application/nomination has been received from <input type="text"/> (name of pensioner)			
Whose address is <input type="text"/>			
Place		Signature of Head of Office	
Date		Signature of Head of Office	
		Full Address:	
[G.I..Dept. of Pension and Pensioners' Welfare, Notification No.34 (5)/83-Pension Unit, dated the 17th April, 1985, published as S.O. No. 1870 in the Gazette of India, dated the 4th May, 1985.]			