PENSIONER'S RECORD SHEET (FAMILY PENSION)

To, The General Manager, Personnel Admn., Division, H.O., MANGALORE

	10.Particulars of Spouse & Children of the deceased employee		Relationship	Date of Birth	Martial Status	Occupation (to be specified)	Address of the Employee/School/ College/Institution	Physical/Mental disability, if any
Affix a recent Photograph of the Optee	Name	Sex						
with signature across the Photograph	_							
Bio-Data of the Deceased Employee								
1. NAME	11. Particulars of Employment/Occupation of family members						12. Branch where family pension to be credited	
	Name and address of the Organisation	Date of Joini	ng Designatior	the organ		Monthly employ- ments /Income		
2. E/M No.				employe				
3. Date of Birth							Residential Address of the	Optee
4. Date of Appointment								
5. Branch/Office last worked							Phone: Mobile:	
6. Whether died while in service or after retirement	 Enclosed: Age proof of children as vouched in SSLC/School T.C., Birth Certificate of infants/illiterates Death Certificate of the employee Deed of adoption of adopted Children if any Medical Certificate for physical/mental disability form the Medical Officer not below the rank of Civil Surgeon Affidavit sworn by spouse of the deceased employee before Notary Public to the effect that he/she is the legal heir 						 I declare that the information furnished above are true to the best of my knowledge and in case the information furnished above are found to be untrue/incorrect the benefits under the Scheme are liable to be forfeited. I undertake to furnish any changes in the particulars furnished at 10 and 11. 	
7. Designation at the time of retirement/death								
8. Date of retirement								
9. Date of Death	-						Date: Signature of th	e Optee)
Certified that the optee has signed before me and verified the enclosed Xerox copies with the original								

Date: