



Memo-It is requested that this form may be used for submission of next bill

Name of the Pensioner :
(In block letter)

P. P. O. No. _____

on20

(The number of P.P.O. Should be inserted above by the pensioner)

PROVINCE	PENSION AND OTHER RETIREMENT BENEFIT	Voucher No.	of
	Superannuation and retired allowances		list of payments
STATE		for	20

Received the amount of PENSION due to me for the month of
..... 20 as late

A (i) "I declare that I have not received any remuneration for serving in any capacity either in Government Establishment or in an Establishment paid from a Local Fund during the period for which the amount of pension claimed in this bill is due."

Pensioner

Or

(ii) "I further declare that I have accepted commercial employment."

Pensioner

Or

(iii) "I declare that I have been re-employed during the period in the

office of the
so salary of ₹ Per mensem My pay at the time of
retirement of pension was ₹ a month

Pensioner

Or

(iv) "I further declare that I have accepted commercial employment after obtaining/without obtaining the previous sanction of the I. C. A. R. to such acceptanc"

Pensioner

Station

The

Net amount (to be written by the pensioner in words)

(Rupees

1. Pension :
2. Dearness Relief :
3. Medical Allowances :
4. Arrear D.R. :

TOTAL

Deduction

NET ₹

₹

P.

Pensioner's residence

Pay ₹ (Rupees)

Auditor Accounts Officer

Cheque No.

Received payment

₹1/- REVENUE STAMP
FOR PAYMENT
EXCEEDING Rs. 5000/-

(See Reverse)

Pensioner

This is to certify that I am not in receipt of Medical Assistance/ Reimbursement/Facility from any Govt./Semi. Govt. aided Agency.

Annual Attendance due on Identified
Life-certificate

by me

Attested

Signature

Designation

or Address

Certificate to be give in case of non-attendance in person

(P.T.O)

CERTIFIED that I have seen the pensioner
and that he/she is alive on this date and that the bill has been signed by him/her.

Thumb impressed

.....
.....
.....

Signature
Name
Designation

The following endorsement should be signed by the Pensioner :

Please make the cheque payable to (Banker)
Pensioner

Either of the following endorsements should be signed by the pensioner :-

(1) Please make the cheque payable to (Banker)

(2) Please Pay to
deliver the cheque to

Pensioner

***(State name of the pensioner. He should be identified by some one known to the office of the Audit & Accounts wings. N.I.R.J.A.F.T.)**

Signature of Pensioner

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