APPLICATION FORM FOR GRANT OF MONTHLY STATE ALLOWANCE TO THE DEPENDENT UNMARRIED & UNEMPLOYED DAUGHTER(S) OF A FREEDOM FIGHTER, RECEIVING CENTRAL PENSION UNDER S.S.S.P. SCHEME

(1)	Name of the A (In block lette				Photograph be pasted he	
(2)	(a) Father's N (Whether enjoy Pension, if yes	yed Samman		in the Man	- July Chair	
	Period)	ander Land	· · · · · · · · · · · · · · · · · · ·	omto		track "And to the
	(b) Mother's I (Whether enjoy Pension, if yes	yed Samman			<u> </u>	
	Period)	1.0	: F1	romto		
(3)	Address of the	Applicant				
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	(b) Permanent					
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	Particulars &	status of fami	ly members (In	cluding of deceased m	nembers):	
lo.	NAME	ADDRESS	DATE OF BIRTH/ AGE/ DATE OF	RELATIONSHIP WITH THE APPLICANT	STATUS MARTIAL/ EMPLOYMENT	MEMBERS WHO RECEIVED OR ARE
			DEATH(IN CASE OF DECEASED		•	PRESENTLY RECEIVING SAMMAN
	8		MEMBERS)			PENSION, MENTION P.P.O.
					1	NO.(S)

		. K	DATE OF DEATH(IN CASE OF DECEASED MEMBERS)		OR ARE PRESENTLY RECEIVING SAMMAN PENSION, MENTION P.P.O. NO.(S)
(i)					
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(iii)		1 .			
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(5) Name of the Freedom Fighter:	 	 		• • •
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Contd. overleaf

	Whether receiving Central I (a) P.P.O. No.	:		
	(b) Date of commencement of	f pension :		
	(c) Amount of pension receiv	ing at present :		3 =
	(d) Name of the Treasury/Bar A/c No.(Whether from the Being drawn)	pension is	.0	
(7) V	Whether receiving any allow			
	a) P.P.O. No.			
(b) Date of commencement of	pension :		
	c) Amount of pension receivi			
(d) Name of the Treasury/Ban A/c No. (Whether from the Being drawn)	k Branch & pension is		
(8) N To	ame of the Treasury whether it o draw the State allowance no	from she intends w prayed for:		2
Ca	the case where one or more a sis/have already been submitted use, mention date(s) & place(s) evious submission(s).	for the same		, ⁵ 2,
				
		4		
		DECLADATIO	N.	
I he	reby solemnly declare that the	DECLARATIO		
Date	reby solemnly declare that the			ion are true & corr
Date			the above applicat	
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