

# INDIAN INSTITUTE OF SCIENCE Bangalore - 560 012

#### **FINANCE & ACCOUNTS**

### LIFE CERTIFICATE

(To be submitted by FAMILY PENSIONER once in a year in November)

Name of the Family     Pensioner				6. PPO N	No.		o.c.		
2. Date of Birth				7. PAN N	10.				
3. Date of death of Pensioner		8. Bank A/c I	No.						
4. Address for Communication	and the distance of			9. Bank	/ Bra	nch			
5. E-mail ID (if any)	Jan american		10.	Telephone	No.		2:71		
I hereby declare that I am resuch an event promptly to	2. CERTIFICAT not employed and not earing the Institute. (Applicable to	TE OF NON EMPL g more than Rs. 3,50 family pensioner wh	0/- pe	er month a	nd I u	under 18-25	take to	repor	<b>t</b>
Place:				Signature F	/ Thu	mp In y Pen	npress	ion of	the
Certified that I have seen the fa		and that he / she is	alive	on this da	ite.				holder o
	Signatur	е		use a result of the second					
	Signatur								
Designati		ne							

# The life certificate should be got signed by the family pensioner by any of the following authorized persons :

- 1. The Chairman (of the Department from which employee has retired)
- 2. Gazetted Officer.
- 3. Branch Manager (of the Bank from which pensioner draws his / her pension)
- 4. Inspector-in-charge of a Police Station (of the locality in which pensioner resides)
- 5. Member of the Legislative Assembly / Council.
- 6. Tahsildar.
- 7. Pension disbursing authority.



2. Date of Birth

3. Date of Retirement

4. Address for Communication

1. Name of the Pensioner

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8. Bank A/c No.

6. PPO No.

7. PAN No.

9. Bank / Branch

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5. E-mail ID (if any)		10. Telephone No.
Place:		
Date:		Signature / Thump Impression of the Pensioner
		Pensioner
Date:	and that I	Signature / Thump Impression of the Pensioner holder of the Pensioner holder of the pensione / she is alive on this date.
Date:  Certified that I have seen the pensioner Mr./ Ms.  Pension Payment Order (PPO) No.	and that h	Pensioner holder of
Date:  Certified that I have seen the pensioner Mr./ Ms.  Pension Payment Order (PPO) No.  Sig		Pensioner holder of
Date:  Certified that I have seen the pensioner Mr./ Ms.  Pension Payment Order (PPO) No.  Sig	nature Name	Pensioner holder of
Date:  Certified that I have seen the pensioner Mr./ Ms.  Pension Payment Order (PPO) No.  Sig	nature Name	Pensioner holder of

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