

FORM E

NOMINATION FOR FAMILY PENSION

I hereby nominate the persons mentioned below, who are members of my family, to receive in the order shown below the Family Pension which may be granted by Government in the event of my death after completion of 10 years qualifying service :

Name and address of nominee	Relationship with officer	Age	Whether married or unmarried
1	2	3	4

This nomination supersedes the nomination made by me earlier on _____ which stands cancelled.

N. B.—The officer should draw lines across blank space below the last entry to prevent the insertion of any name after he has signed.

Dated this _____ day of _____ 198 _____ at _____

Witnesses to signature :

1

2

Signature of Officer

(To be filled in by Head of Office in the case of a non gazetted officer.)

Nomination by

Signature of Head of Office,

Designation

Date

Office

Designation.