

**FAMILY ASSISTANCE SCHEME
RECEIPT-CUM-DECLARATION FORM**

(Service No. _____ / Case No. _____)

1. Received an amount of Rs. _____ in my account No. _____ through NEFT or
Received the following cheques for the year _____

| Cheque No. | Cheque Dt | Amount |
|------------|-----------|--------|
| | | |
| | | |
| | | |
| | | |

2. Rank & Ser. No. of the late Officer/ Airmen/ NCs(E) _____.

3. Name of Beneficiary _____.

4. Present Address (in block letter). _____

_____ Telephone No. _____

5. Are you remarried? (Yes/ No) (to be filled by Wife) _____

If yes please indicate date of marriage _____

6. Details of Children

Name

Date of Birth

Studying/ Employed

Marital Status

Date : _____

Signature of _____

The above statements of facts are correct and the signature of Beneficiary has also been verified.

Date :
Manager

Office Seal Signature of verifying officer
Gazetted Officer/ Village Sarpanch/ Bank