

Place :-.....
Date :-.....

Signature (or thumb-impression if illiterate) and Name of the pensioner.
Address :-.....

Witness : Signature

Name & Address :

Signature of Head of Office :
STAMP

Acknowledgement to be sent by the Head of Office.

Certified that nomination has been received from.....(name of pensioner) whose address is
.....Form A has been cancelled and returned to him

Place :-.....
Date :

Signature of Head of Office with Full Address