

Annexure II
FINANCIAL CONDITION REPORT

(Particulars of ex-serviceman and his family for grant of financial assistance from
Raksha Mantri's Discretionary Fund)

1. Name of the Applicant/ex-serviceman : _____

2. Service No. _____ Rank : _____

3. Address : _____

4. Date of (a) Enrolment : _____
(b) Discharge _____

5. Reasons for discharge : _____
(As mentioned in Discharge document)

6. Character at the time of discharge : _____

7. In case of dependent, mention relation with ex-serviceman : _____

8. Date of death of ex-serviceman (If applicable) : _____

9. Particulars of family members (details of all the children to be covered):-

Srl No.	Name	Relationship with the Ex- Serviceman	Whether dependent/ Independent	Age Occupation/	Monthly income

10. Detailed report on the Financial condition of the petitioner/petitioner's family:-

(i) Was/is the ex-serviceman in receipt of pension : Yes/No.
(ii) Is the applicant in receipt of pension Yes/No.

(iii) Nature of pension : Service pension/family pension/disability pension/civil pension.

(iv) Total emoluments : Basic Rs. : _____
Dearness Relief : Rs. _____
Total Rs : _____

(v) Other terminal benefits at the time of retirement Rs. _____
(such as Group Insurance, Gratuity, Encashment of Leave)

(vi) Land holding, if any : _____
Annual income from the land Rs. _____

(vii) Income from any other source : Rs. _____
(such as rented houses, others)

(viii) Present employment and income therefrom : _____

(ix) If reply to para 10(viii) is nil, mention how he/she is maintaining his/her family _____

(x) Whether in receipt of Second Pension from re-employment, if yes, state Amount : Rs. _____.

11. Is/Was the ex-serviceman re-employed : _____

12. If not, what was the source of income after retirement from the Armed Forces _____.

13. Financial Assistance received from various other sources. Rs. _____.
(Details of financial assistance received from KSB/RSB/ZSB for any purpose in the past).

14. State whether financial assistance received from any source for self-employment (if any) was utilized for the purpose:-

15. Nature of financial assistance required : _____

(Applicant/ZSB is required to fill up the particulars given below in respect of the nature of financial assistance required only).

16. Assistance to old and infirm ex-servicemen/widows (Rs. 500/- per month for two years:-

(i) Whether the ESM/dependent is in receipt of old age/WW II pension/ financial assistance given by State Govt. under various State Govt. Scheme. _____.

(ii) If not eligible for old age/WW II/FA under any State Govt Scheme, the reasons thereof _____

17. Financial Assistance for Daughter's Marriage (Rs. 8,000/-)

(i) Actual date of solemnization : _____.

(ii) Whether confirmation certificate/ Marriage invitation Card attached : _____.

(iii) How the marriage expenditure was met: _____

(iv) Details of loan taken for the purpose if any, and amount still outstanding:
Rs. _____.

18. Medical Reimbursement (Upto a maximum of Rs, 15,000/-)

(i) Whether the applicant approached MH/Govt. Hospital for
treatment : _____

(ii) If so, whether a copy of MH/Govt. Hospital reference enclosed : _____.

(iii) If not, the reasons for not approaching MH/Govt. Hospital: _____.

(iv) If re-employed, details of medical benefit scheme, if any available with
the re employer: _____

(v) Whether the applicant is member of AGI/AFGI Medical Benefit scheme?
If so, the AGI/AFGI Number: _____.

(vi) Whether original medical bills/receipts have been countersigned by
competent medical authority. _____.

(vii) Whether summary of medical bills enclosed: _____.

(viii) Details of financial assistance provided from State Govt funds in respect
of instant case, if not, reasons thereof: _____.

19. Grant for Children Education (Rs 100/-per month per child for maximum of 3
Children.

(i) Particulars of child/children from whom the education grant is applied for:-

Sr. No.	Name	Name of School	Class in which studying	Year

(ii) Whether certificate obtained from the concerned school confirming the date of
birth and above details have been enclosed: _____

(iii) Whether in receipt of scholarship/stipend for education purpose from any
other source: _____.

20. Grant for House Repair (Upto a maximum of Rs. 10,000/-)

(i) Cause of damage : _____.

(ii) Estimated cost of repairs Rs. _____.

(iii) Whether certificate obtained from Gram Pradhan is enclosed: _____.

(iv) Whether any relief given by the State Govt./Other authority? If not,
reasons thereof: _____.

21. Specific recommendations of Secretary, Zila Sainik Board :_

Date :

Signature DSWO

Office Seal

Designation

Note : The cases of financial assistance from RMDF are processed on the basis of information/particulars furnished in the FCR form by the ZSB. The Zila Sainik Welfare Officers should ensure that information/particulars given in the form are correct and in accordance with the discharge certificate and other documents. No column should be left blank.