

FORM No.16
NOMINATION FOR PAYMENT OF ARREARS OF PENSION
(See Rule 138 Part III)

Pension Disbursing Authority/Head of Office

(Name of Bank/Treasury/Post Office/Authority who is competent to certify RRA/Pension Sanctioning Authority) : Sub Treasury, Mulamthuruthy

Place:Mulamthuruthy

I, NASEEMA,M.P , hereby make the following (name of the pensioner/Family Pensioner in capital letters) nomination for the payment of arrears of pension.

Name & Address of the nominee	Relationship with the pensioner/family pensioner	Date of birth of the nominee	If the nominee in column (1) is minor, name and address of the person who may receive the said pension during the nominees minority	Share payable	Name and address of the other nominee in case the nominee under column(1) above predeceases the pensioner	Relationship with the pensioner/family pensioner	Date of birth of other nominees	Share payable against the share of original nominee	If the nominee in the column (6) is minor, name and address of person who may receive the said pension during the nominee's minority	Contingency on happening of which nomination shall become invalid
1	2	3	4	5	6	7	8	9	10	11
ANJANA M BABU ANJANAM, MANATTIL UDAYAMPEROOR P.O. PIN 682307.	Daughter	29.11.1996	NA	Full	NA	NA	NA	NA	NA	

Place: Udayamperoor
Date :05.2023

Signature or thumb impression if illiterate and
Name of the petitioner/family pensioner

NASEEMA.M.P.

Address:

ANJANAM,
MANATTIL
UDAYAMPEROOR P.O.
PIN 682307

Witness :

Signature:

- (1) Name and Address
Valsala A,K,,
Manattil,
Udayamperoor

- (2) Pension payment Order No.111474522

(Acknowledgement to be sent by the Pension Disbursing Authority/Head of Office in the duplicate copy)

Certified that application/Nomination (alternative nomination in form 16) has been received from NASEEMA.M.P.(name of pensioner) whose address is NASEEMA.M.P., ANJANAM, MANATTIL, UDAYAMPEROOR P.O.,PIN 682307.

Particulars of the pensioner/family pensioner have been verified with reference to the available records in this office and receipt of the nomination is acknowledged.

Signature of Pension Disbursing Authority/
Bank/treasury/Post office/Pension Sanctioning
Authority/Head of Office

Full Address;

Place :

Date :