

**DOCUMENTS REQUIRED FROM RECORD OFFICE FOR  
PAYMENT OF DISABILITY BENEFIT TO PBOR FROM  
ARMY GROUP INSURANCE FUND**

| <b>Ser No</b> | <b>Document</b>   | <b>Remarks</b>                          |
|---------------|---|---|
| 1.            | Appx 'H' to AO 23/2002/AGI  | For all cases.                          |
| 2.            | Check List.   | -do-                                    |
| 3.            | Approved copy of AFMSF-16   | -do-                                    |
| 4.            | Bank details duly signed by bank manager  | -do-                                    |
| 5.            | Part II order notifying date of SOS   | -do-                                    |
| 6.            | Willingness/ Unwillingness cert to serve under shelter appt duly signed by indl and recommendation of OC unit & OIC Records | For disposal of LMC pers in SHAPE-2 & 3 |
| 7.            | Discharge Order   | -do-                                    |
| 8.            | Details of LMC (Temp/ Permt)  | Extension cases only                    |
| 9.            | Details of Hosp Adm/ Disch  | -do-                                    |
| 10.           | Photocopy of AFMSF-15/15A when indl placed in LMC (Temp/ Permt) initially   | -do-                                    |
| 11.           | Certificate to the effect that indl was not in LMC (Temp/ Permt) or in hosp on crucial date of extended service.            | -do-                                    |
| 12.           | Photocopy of part II order granting extn.   | -do-                                    |
| 13.           | Photocopy of Sanction of Competent Authority where indl has been discharged on account of discp/ undesirable etc.           | -                                       |