

NOMINATION FOR BENEFITS UNDER THE CENTRAL GOVT.

EMPLOYEES GROUP INSURANCE SCHEME, 1980.

| him/th be sar ees G which | em the right actioned by t roup Insuran | to receive to he Central Go ce Scheme, 19 ome payable | the extensivernment 980 in the | persons mer nt specified under the e event of | who is/are ationed below a below any amount of the contral Government of the contral while age of superare the contral co | nd confer on bunt that may nent Employ- in service or |
|------------------------------------|-----------------------------------------------|----------------------------------------------------------------|--------------------------------|--------------------------------------------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| S.No. | Name and addresses of Nominee/ nominees. | Relationship with Govt. servant. | Age | Share of amount to be paid to each. | Contingencies on the happ- ening of which the nomination shall become invalid. | Name, address and relationship of the person, if any to whom the right of the nominee shall pass in the event of his predeceasing the Govt. servant. |
| 1 | 2 | 3 | 4 | 5 | 6 | 7 |
| 2. | | | | | | |
| 3. | | | | | | |
| | ated, thisvo witnesses | | day of | f | 201 | at |
| Aı | testation by the | he Unit officer | | | Signature of | Govt. servant |

- NB. The Govt. servant should draw line across the blank space below his last entry to prevent the insertion of any names after he has signed.
 - * This column should be filled in so as to cover the whole amount that may be payble under the Insurance Scheme.
 - ** Where a Govt. servant who has no family makes nomination, he shall specify in this column that the nomination shall become invalid the event of his subsequently acquiring a family.