DETAILS REQUIRED FOR PENSIONERS/FAMILY PENSIONERS I- CARD (Please fill in CAPITAL LETTERS & BLACK INK)

Phot	to
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NAME	
FATHERS	
/SPOUSE NAME	
POST OF	
RETIREMENT	
DATE OF BIRTH	
D. 4.7.5. O.F.	
DATE OF	
RETIREMENT	
BLOOD GROUP	
BIRTH MARK/	
IDENTIFICATION	
MARK	
CONTACT NO.	
CONTACT NO.	
RES. ADDRESS	
SIGNATURE	