

**JAMMU AND KASHMIR GOVERNMENT**

No. of P.O. issued from the office of Accountant General	Name of Pensioner	Monthly rate		Period for which claimed	Amount claimed		Signature of Actual Payee (A receipt stamp should be affixed in case of payment exceeding Rs. 20)	Remarks
		Rs.	P.		Rs.	P.		

For use in Accountant General's Office

Page \_\_\_\_\_

Admitted Rs. \_\_\_\_\_

Objected to Rs. \_\_\_\_\_

For \_\_\_\_\_

Treasurer \_\_\_\_\_

Auditor \_\_\_\_\_

O.G.

Ed.

Assistant Treasury Officer

Dated \_\_\_\_\_

We declare that We have not received any remuneration for serving in any capacity  
I I in any department of the State or any establishment paid from Dharmarth Fund during the period for which the amount of pension claimed in this bill is due.

I declare that I have not taken up and will not take up any contract or lease or any other profession which has anything to do with the department or departments of the State which wherein I was serving prior to my retirement.

Signature of Pensioner.

NOTE :-In case a life certificate is not attached to the bill it will be considered that the pensioner has attended the Treasury personally to receive the amount of the pension.

**For use in Treasury**

Treasurer \_\_\_\_\_

Please Pay Rs. \_\_\_\_\_

Rupees. \_\_\_\_\_

**For use in Accountant General's Office**

Page \_\_\_\_\_

Admitted Rs. \_\_\_\_\_

Objected to Rs. \_\_\_\_\_

For \_\_\_\_\_

Auditor

Treasurer

Supdt.

O.G.

Ext.

Assistant Treasury Officer

Dated \_\_\_\_\_