## FORM 4

[See rules 50(15), 57, 58, 59, 60, 62, 74, 79 and 80]

## Details of Family Important

- 1. The original Form submitted by the Government servant is to be retained. All additions/ alterations are to be communicated by the Government servant/Pensioner along with the supporting documents and the changes shall be recorded in this Form under the signature of Head of Office in Col (7). No new Form will substitute the original Form. However, the retiring Government servant should submit the details of family afresh along with Form 6.
- 2. The details of all members of family (whether eligible for family pension or not) including spouse, all children, parents/parents in laws and disabled siblings (brothers and sisters) may be given.
- 3. The Head of Office shall indicate the date of receipt of communication regarding addition or alteration in the family in the 'Remarks' column. The fact regarding disability or change of marital status of a family member should also be indicated in the 'Remarks' column.
- 4. Wife and husband shall include judicially separated wife and husband.

Name of the Government

servant/ Subscriber

- 5. The pensioner shall intimate the details of change in family structureafter retirement in the proforma prescribed under Dept. of P.& P.W., O.M No. 1 (23)- P.&P. W/91-E, dated the 4<sup>th</sup> November, 1992.
- 6. Copies of birth certificates to be attached. Copies of any other relevant certificates, ifavailable, should be attached.

Designation

Nationality

.N.	Name (Please see notes below before filling)	Date of birth  DD/MM/YYYY)	Aadhaar no.* (optional)	Relationship with Govt. servant/ retired Government servant / Subscriber	Marital status	Remarks	Dated signature o
1	(1)	(2)	(3)	(4)	(5)	(6)	(7)
1.							
2.	. ца у						
3.							
4.							
5.	100-20-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1						
6.	-			:			
7.			·				
8.	· · · · · · · · · · · · · · · · · · ·		;				
·····	I hereby unde		the above pa	articulars up to date b	y notifyi	ng to the H	lead of Office
	E-mail:( Optio	nal)		Place:			
	Mobile:(Option	nal)		Date:		ر (	(Signature)

\*Providing Aadhaar No. is voluntary. However, if it is provided, consent to link it to Bank Account and also for authentication of