**ANNEXURE C.**

**RECEIPTED BILL.**

Received the sum of **Rs.**  ( ) being the total of the entitlement of **Rs.** ( ) from the insurance Fund and / or **Rs**. ( ) from the Savings Fund accrued to \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Name \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Group “**A/B/C/D”**  under the State Government Employees Group Insurance Scheme, 1984.

Dated:

Signature(s) of the Recipents(s)

Name:

**FOR USE IN DEPARTMENT / OFFICE**

1. Relevant bio-data of the member
2. Type of Group of the member (i.e. lowest group) viz. “A” on initially joining the Scheme on 01.01.1984.
3. Year of acquiring membership of higher group “A”

(i)

1. Countersigned for payment of **Rs.**  ( ) to claimant(s) Cross Cheque/Demand draft to be issued in favour of claimant(s).

Signature:

Date:

Designation of the DDO:

**FOR OFFICE USE ONLY.**

Passed for payment of Rs. \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ (Rupees \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ ).

Payment through Cheque(s) No. \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Accounts Officer: