

ANNEXURE –II

Format in which information is required to be sent by DDO to Director of Accounts and Treasuries  
[c.f. para 14.1 and 14.2]

Name of DDO/Code No. :

Name of Office and Address :

Sl. No	Name of the Government Servant	Designation(s)	Basic Pays (s)	Date of Birth	Date of Joining in Service	Details of nominee(s) for the accumulations under Pension Account			
						Name of Nominee(s)	Age and Date of Birth	Relationship with Government Servant	% age of share
1	2	3	4	5	6	7	8	9	10

Date \_\_\_\_\_

Name of DDO

Signature

Office Seal