

**REGISTER OF APPLICATIONS FOR PENSION**

S No.	Date of receipt of Pension papers	Name & Father's Name	Designation	Station	Date & cause of termination of service	Rate of Pension
1	2	3	4	5	6	7

S.No.	Recoveries	No. & date of pension payment Order	P.P.O. issued on	Date of commencement of pension	Remarks	Signature of Accounts Officer
8	9	10	11	12	13	14

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