ANNEXURE-IV REGISTER TO BE MAINTAINED BY TRASURY OFFICER / NODAL OFFICER-2

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SI. No.	Name of the Employee/ Deceased Subscriber	Emp.ID & PRAN	Date of Demise	Name of the	PPO ID and PPO NO.	Sanctioning	Date of Proposals forwarded	Claime ID	Initial of T.O / N2	Date of Transfer / Value of APW	Initial of		mittance HOA 101-00-06	Initial of	REMARKS
NO.	with Desgn.	PRAN	Delilise	Claimant(s)	PPO NO.	Authority with Date	to CRA	ם	1.0 / N2	returned by CRA	T.O /N2	Challan No. with Date	Amount	T.O /N2	
1	2	3	4	5	6	7	8	9	10	11	12	13(a)	13(b)	14	

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