FORMAT OF APPLICATION FOR SETTING RIGHT THE MISSING CREDIT UNDER CONTRIBUTORY PENSION SCHEME

Name & Desgn. Of the Individual: Date of Birth:							PRAN ACCOUNT NO.: NAME O FTHE DTO/STO:				
SI.N o.	Month of Missing Credit	Amount of Missing Credit (In Rupees)			Total Amount						
		Regular Subscription	Arrear Subscription	Total	of the CPS Schedule in which the missing credit found	Bill Gross Amount	Bill Net Amount	Token No.& Date	Vr.No. and Date	Date and place of Encashment	Remarks
		_					-		-		

Verified the particulars with this office records and found correct and missing amount may be credited in the individual account.

Signature and Seal of the Drawing and Disbursing Officer.

Verified the particulars with reference to the Treasury records and

found correct.

Signature of the Treasury Officer.