

चेतावनी - चेक का तुरन्त अपने बैंक में जमा करवायें।
WARNING - DEPOSIT THE CHEQUE IN YOUR BANK IMMEDIATELY.



Tel : 26142897

EME/MA/1601681

ARMY GROUP INSURANCE FUND

AGI BHAWAN, RAO TULA RAM MARG,
POST BAG NO 14, P O - VASANT VIHAR,
NEW DELHI- 110 057.

To, NK JADHAV BABAN NARAYAN

26/04/2012

VPO-YESHWANT NAGAR
DIST-SOLAPUR

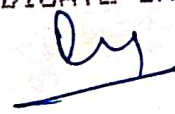
MAHARASHTRA PIN 413116

PAYMENT OF Regular Maturity **BENEFIT**
UNDER ARMY GROUP INSURANCE SCHEME IN RESPECT OF MEMBER
OR 14633062 N NK JADHAV BABAN NARAYAN
SYNDICATE BANK, AGI BHAWAN, NEW DELHI-110057
CHEQUE NO 76236 DATED 25/04/2012 FOR Rs. 141464.00
HAS BEEN SENT TO YOUR SF A/C No. 11432165303
STATE BANK OF INDIA AKLUJ-00305
TOWARDS PAYMENT OF ABOVE BENEFIT. SOLAPUR
AS PER DETAILS GIVEN BELOW :-

CREDITS	AMOUNT	DEBITS	AMOUNT
AMOUNT PAYABLE	167364.00	SHORT RECOVERY	
EXCESS RECOVERY		MBS SUBSCRIPTION	25900.00
TERMINAL BONUS		EIC SUBSCRIPTION	
OTHER CREDITS		INVESTED IN SSD*	
		SHARE OF OTHERS	
		(A) WIFE/HUSBAND	
		(B) MOTHER/FATHER	
		(C) CHILDREN	
		(D) OTHERS	
		LOANS	
		(A) HDFC	
		(B) AGIF	
		(I) HBA	
		(II) CONVEYANCE	
		(III) OTHERS	
		OTHERS DEBITS	
TOTAL	167364.00	TOTAL	25900.00
PAYABLE	141464.00	REMITTED TO	
NET PAYABLE	141464.00	BENEFICIARY	141464.00

CHEQUE IS PAYABLE AT PAR AT ALL BRANCHES OF SYNDICATE BANK

* Invested with AGIF Bankers


LT COL/MAJOR
AD/DAD AGI (CLAIMS)
FOR MANAGING DIRECTOR

COPY TO:
1. RECORDS
2. HDFC/AGI ADV. CELL
3. FIN



एक्सटेन्डेड आर्मी ग्रुप इन्शुरेन्स सर्टिफिकेट
EXTENDED ARMY GROUP INSURANCE
CERTIFICATE

To be surrendered on the death of Insurant/Survival after validity period to AGI Fund,
Rao Tula Ram Marg, Post Bag No. 14, Vasant Vihar, New Delhi-110 057



DETAILS OF INSURANT

जारी करने की तारीख Date of Issue 24/04/2012

प्रमाण पत्र संख्या Certificate No. 40741077

नम्बर No. DR 14633062 रैंक Rank NK

नाम Name JADHAV BABAN NARAYAN

रेजि/कोर Regt./Corps

Electronics & Mechanical Engineers

जन्म तिथि Date of Birth

30/06/1975

सेवा निवृत्ति Date of

31/05/2012

की तारीख Retirement

बीमा अवधि Valid Period of EI cover from

01/06/2012

से To

31/05/2012 तक

मृत्यु पर Sum assured Rs. 300000.00

उत्तरजीवी लाभ Surviving Benefits 25900.00

बीमाकृत रकम on death

25900.00

वापिस होने वाली प्रीमियम One time refundable premium Paid Rs.

नामिनि का सम्बन्ध और पता

दूसरे नामिनि का नाम, सम्बन्ध और पता

Nominee with Relationship and Address

Contingent Nominee(s) with Relationship

SMT SUVARNA

Wife

VPO-YESHWANT NAGAR

DIST-SOLAPUR

Son

MAHARASHTRA

413116



(Handwritten signature)

जारी करने वाले अधिकारी के हस्ताक्षर
Signature of Issuing Officer

AD AGI

AD/DAD-AGI

To,
Army Group Insurance Fund,
AGI Bhawan, Rao Tula Ram Marg,
Post Bag No. 14, P.O. Vasant Vihar,
New Delhi-110 057

1. मैं बहुत दुःख से सूचित करता/करती हूँ कि मेरे पति/पत्नी/माता/पिता/ (नम्बर) रैंक
I regret to inform that my husband/wife/mother/father/..... (As applicable) No. Rank

नाम मृत्यु की तारीख मृत्यु का कारण स्थान
Name Expired on (date) due to (cause) at (place)

2. मैं मृत्यु प्रमाण पत्र भेज रहा/रही हूँ।
I enclose the death Certificate.

3. मैं प्रमाणित करता / करती हूँ कि प्रमाण पत्र के अनुसार मैं ही नामिनि या द्वितीय नामिनि हूँ।
I certify that I am the Nominee/Contingent Nominee (as applicable) as per the Certificate above.

तारीख
Date

नामिनि के हस्ताक्षर
Signature of Nominee

Notes :-

1. अगर दूसरा नामिनि क्लेम कर रहा है तो पैरा 3 में कारण लिखें।

In case contingent nominee is the claimant state reason for so doing under paragraph 3 above.

2. यह प्रमाण पत्र तभी मान्य होगा जब एक्सटेन्डेड इन्शुरेन्स नम्बर के बीमा की रकम बचत बीमा रकम राशि से रिलीज अथवा रिटायरमेन्ट के समय कटा दिये हों तथा पाने के योग्य हों।

This certificate is valid subject to recovery of lumpsum one time refundable premium from your maturity benefits and your eligibility for extended insurance cover at the time of your release or retirement.