

FORM FOR CLAIMING EX-LEGISLATOR'S PENSION

Name of the Pensioner : **Sri/Smt**

, **Ex.MLA.,**

Permanent Residential Address :

Pension Sanction Order No :

HEAD OF ACCOUNT

2071 - Pension and other Retirement Benefits
01 - Civil M.H.
111 - Pension to Legislators
SH(04)- Pensions to Legislators
040 - Pensionary Charges
041 - Pensions

Name of the Pensioner : **Sri/Smt**

Ex.MLA.,

Pension per month Rs /- (Rupees)

(FOR OFFICE USE ONLY)

Received a sum of Rs. _____ (in words) (_____)

Being my pension in accordance with the Ex-Legislator's Pension Sanction Order No. _____
for the month / months of _____

Deductions: Rs..... Rent..... LCC Misc.....

Net Payable _____ Rs. _____

Dated the _____ 2020 . Not Payable before _____ 2020.

Passed for Rs. _____

Rupees _____

Assistant Secretary
Andhra Pradesh Legislative Assembly

*

Signature Or Thumb Impression

Revenue
Stamp
1.00

DECLARATION

I declare that I am not in receipt of any salary or remuneration from the Central Government or the State Government or any Corporation owned or controlled by the Central Government or the State Government or any Local Authority.

I declare that I have not been re-elected to the Parliament or to the Andhra Pradesh Legislative Assembly or any other State Legislature and I am not a sitting Member of the Parliament or the Andhra Pradesh Legislative Assembly or of any other State Legislature.

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Signature Or Thumb Impression

AUTHORISATION

(In the case of pensioners who desire the pension amount to be credited to his Bank Account)

Please Pay to:

Name of the Bank :
Name of the Branch :
Bank Account No. :
IFSC CODE :

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Signature Or Thumb Impression