

State Bank of India

Branch.....

(To be submitted by the pensioner once in a year in every November)

Certified that I have seen the pensioner

Smt / Shri / Ms

Holder of Pension Payment Order No/PF Index No.....

And that he / she is alive on this date.

Name:.....

Designation of Authorised Officer:.....

Place :

Date :

Signature of the Authorised Officer (Seal)

II. Non-Employment /Re-Employment Certificate

i) I declare that I have not been serving in any capacity either in a Government Department / Office, company, corporation, autonomous body or Society of Central or State Government or Union Territory or a Local Fund during the halfyear ended May/November, 20..... OR I declare that I have been employed/re-employed in the Office..... Which is a part of / financed by..... Govt. and was in receipt of the following monthly rates of emoluments during the half year ended May/November, 20..... Or during the month of falling within the said half year.

(a) Pay..... Special Pay..... Allowances..... (including DA., ADA etc.) OR (b) Honorarium..... Further , that the orders of my re-employment do/do not stipulate my pension being held in abeyance during the re-employment period. OR

***(ii)** I declare that I have not accepted any commercial employment in India. OR I declare that I have accepted commercial employment in India, after obtaining previous sanction of the Central Government and none of the conditions, if any, attached thereto by Government has been violated. Note : this declaration is required to be given for a period of two years from the date of retirement. ***(iii)** I declare that I have not accepted any employment under a Government outside India / an International Organisation of which the Government of India is not a member . OR I declare that I have accepted employment under a government outside India/ an International Organisation of which Government of India is not a member after obtaining the previous sanction of the Central Government and none of the conditions attached thereto by the government has been deviated from.

Name of the Pensioner..... Signature.....

Place :..... Date.....

III. Certificate of Non-Re-Marriage / Non-Marriage

I hereby declare that I am not married / have not been married during the past six months. OR *I hereby declare that I have not been re-married and I undertake to report such an event promptly to the bank. *Applicable only for widow recipient of family pension and to be furnished only once.

Signature Name of the Pensioner..... PF No.....

Place :..... Date :.....

I certify to the best of my knowledge and belief that the above declaration is correct.

Signature of a responsible Officer or a well known Person.....

Place :..... Name :..... Designation:

Address.....

Date :.....