

FORM NO. 6 (Para 15.8)
Nomination for benefits under the West Bengal State Government Employees Group Insurance-cum-Savings Scheme, 1987
(When the Government Servant has a Family)

I hereby nominate the person(s) mentioned below, who is/are members of my family and confer on him/them the right to receive to the extent specified below any amount that may be sanctioned by the State Government under the West Bengal Government employees Group Insurance-cum-Savings Scheme, 1987 in the event of my death while in service or which having become payable on attaining the age of superannuation or cessation of employment with Government for any other reasons and which may remain unpaid at my death.

| Name and address of nominee(s) | Relationship with the Govt. Servant | Age | Share to be paid to each | Contingencies on the happening of which the nomination shall become invalid | * Name, address and relationship of the person, if any, to whom the right of nominee shall pass in the event of his predeceasing the Govt. Servant |
|--------------------------------|-------------------------------------|-----|--------------------------|---|--|
| 1 | 2 | 3 | 4 | 5 | 6 |

Dated, the day of, 20

Signature of two witnesses :

1)

2)

Signature of Government Employee

Countersignature by
Head of Office/Controlling
Officer

* The column No. 4 should be filled up to cover the whole amount that may be payable under the scheme.

N. B. – The Government servant should draw like across the blank space below his last entry to prevent insertion of any names after he has signed.