

Form No 12
Nomination for Payment of Commuted Value of Pension
[See Rule 7 of CCS (Commutation of Pension) Rules, 1981]

To _____ Head of Office
 (Place) _____

I, _____ hereby nominate the person named below under Rule 7 of the Central Civil Services
 (Commutation of Pension) Rules, 1981.

Name and address of the nominee	Relationship with the pensioner	If nominee is minor		Name and address of other nominee in case the nominee under column (1) predeceases the pensioner	Relationship with the pensioner	Date of Birth if the other nominee is minor	Name & address of person who may receive the commuted value of pension during the other nominee's minority	Contingency on the happening of which nomination shall become invalid
		Age	Name & address of person who may receive the said commuted value of pension during the nominee's minority.					
1	2	3	4	5	6	7	8	9

Place: _____
Date : _____
Signature (or thumb-impression if illiterate) _____
Name of the Pensioner _____
Address _____

Witness : Signature _____
 Name & Address _____

Signature of Head of Office
Stamp

Acknowledgement to be sent by Head of Office

Certified that nomination has been received from _____ whose address is _____

Place _____
Date _____
Signature of Head of the Office _____
Full Address _____