## **AUTO GENERATED**

Registration No: 0000012745

## RECEIPT FOR DOCUMENTS CUM TEMPORARY RECEIPT EX SERVICEMEN CONTRIBUTORY HEALTH SCHEME (ECHS)

| 1.  | Received documents from No <u>724679</u> Rank <u>Sgt</u> Name <u>GAJENDRA KUMAR</u> towards application for membership of Ex-Servicemen Contributory Health Scheme (ECHS):-               |   |
|---|---|---|
| 2.  | Pension Payment Order No (PPO No) (Attach photocopy)  | 08/14/B/11228/2016  |
| 3.  | Category of Ward  | General   |
| 4.  | Force Type: Air Force   | 5. Regiment/Unit: <u>32WGAF</u>   |
| 6.  | Permanent Address with State and Pin Code: Village - Chauchakka, Post - Sasamusa, Bihar, Gopalganj, Gopalganj, Bihar, 841428  | Current Address with State and Pin Code: C-5, House No - 55, Nangli Dairy Extention, Baprolla, Najafgarh, New Delhi - 110043, Najafgarh, New Delhi, Delhi, 110043 |
| 7.  | Mobile No: 9694012931 8. DOB: 25  | 9. Date of Retirement: 31 Mar 2016  |
| 10.   | Parent Polyclinic of Pensioner Delhi Cantt (BHDC), MRO No. (if applicable)  |   |
| 11.   | Card Charges @ Rs. 177/- paid Rs.: 708 vide Transaction   | ID:   |
| 12.   | Valid Upto :  |   |
| All photographs to be stamped by issuing Officer.     |   |   |
| Name: GAJEN<br>KUMAR<br>DOB: 25 May<br>Aadhaar No.: 7 | Name: Anuradha Sharma Name: Aryan DOB: 22 Feb 1984 DOB: 19 Feb Andhar No. 995617116441 Andhar No.   |   |
| 13.   | ACTIVATION BY   |   |
| Place:<br>Date:                                       |   | Signature(Stamp with Rank, Name & Appointment, OIC Parent Polyclinic)   |
| Notes :-  |   |   |
| 1/  | This original receipt is required to be returned at the time of collection of Smart Card (s). Receipt will not be destroyed. This will be filed along with the original Application Form. |   |
| 2.  | No Smart Card will be issued if this receipt in original is not produced and final verification by Central Org ECHS.  |   |
| 3.  | Record Office will retain this receipt after checking the Application Form till retirement of the individual  |   |
| 4.  | Stoppage of FMA and deposition of contribution (MRO) as applicable to be ensured prior to issue of this receipt to pre 01 Apr 2003 retirees by Regional Centre ECHS.                      |   |
| 5.  | This receipt will be issued only on verification of original PPO and discharge book for old retirees who are not in possession of old Cards.  |   |
| 6.  | The Original Receipt is valid up to a maximum of THREE MONTHS from the date of issue.   |   |
| 7.  | Slip will be considered activated only after signatures of OIC Parent Polyclinic.   |   |
| 8.  | Aadher verification to be ensured by Polyclinics.   |   |
| 0   | Old and of town receipts will be returned   |   |