

FORM NO. 4.

To

The \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Subject:- Application for Payment of accumulation under  
Himachal Pradesh Government Employees Group  
Insurance Scheme- 1984.

Sir,

I have been a member of the Himachal Pradesh Government Employees Group Insurance Scheme, 1984 since \_\_\_\_\_ . I have retired from service after attaining the age of \_\_\_\_\_ years/I have ceased to be in employment with the Himachal Pradesh Government w.e.f. \_\_\_\_\_. I was holding the post of \_\_\_\_\_ before retirement/cessation of employment with the State Government. I request that the amount due to me under the Himachal Pradesh Government Employees Group Insurance Scheme, may be paid to me .

Yours faithfully,