From:

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To,

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Revised PPO

Sir,

Reference: G of I Order No. 38/37/08 P&PW (A) dated 01 September 2008

Ι retired from Central Government Service from department office under letter No. dated dated Photocopy of the PPO(s) is/are enclosed for ready reference. On account of revision in pension and / or modification in CGHS facilities a revision in PPO has become inescapable.

Necessary certificate as required vide Government Letter No.38/99/99-P&PW(C) Dated the 17th April, 2000 is given under is for your consideration and needful action. I am also enclosing letter from CGHS authorities that my card is not valid for OPD facilities offered by CGHS dispensary with effect from date of issue of the certificate.

Undertaking for Medical Allowance

As per Letter No.38/99/99-P&PW(C) Dated the 17th April, 2000 from Government of India, Ministry of Personnel, Public Grievances & Pensions (Department of Pension & Pensioners' Welfare) sent To All Ministries/Departments of Government of India.

Ι ___, retired employee of а (Office Address) declare that I am residing at (Residential Address indicated in PPO) _, which area is not covered under CGHS or any corresponding Health Scheme administered by the Ministry/Department of

, (as the case may be). I have (also not) obtained CGHS card (bearing No. However, I do not wish to avail OPD facilities from CGHS) and do not wish to obtain a CGHS Card and avail out-door facilities under CGHS/Corresponding Health Scheme of other Ministries/Departments from any dispensary situated in an adjoining area.

I further request you to specifically mention following information in the PPO. 1. Name in full: 2. Nationality: Indian 3. Address in full: Telephone No. with STD Code: 4. Post Last Held: 5. Date of Birth: 6. Date of retirement: 7. Date of Commencement of Pension: 8. Qualifying Service: 9. Revised Pay Scale: 10. Grade Pay: Rs. 11. Revised Pension fixed: Rs. per month 12. Commutation per month: Rs. 13. Date commutation deduction stops: Name of First Family Pensioner: 14. 15. Date of Birth of Second Family Pensioner: 16. Name of First Second Family Pensioner: Date of Birth of First Family Pensioner: 17. Enhanced Family Pension: Rs. per month 18. 19. Normal Family Pension: Rs. per month 20. Date up to enhanced family Pension applicable: Pension Disbursing Authority: 21. 22. Medical Allowance Payable per Month Rs. 23 Any other information as found fit by Pensioner

I am enclosing proof for birth date of the family pensioner(s). As per above referred government order revised PPO was to be issued within 2 months of issue of orders i. e. before 31 Oct 2008. The matter has already been delayed. Therefore, I wish to request you to kindly issue revised PPO and send it to my PDA with copy to me at the earliest.

Enclosures:

- 1. Photocopy of Government Letter No.38/99/99-P&PW(C) Dated 17th April, 2000
- 2. Photocopy of the certificate from Director CGHS,
- 3. Photocopy(ies) of the Birth Certificate(s) for Family Pensioner(s).

Yours Faithfully,

Copy to: 1. Office from where retired

2. Pension Disbursing Authority

Name and signature of pensioner