

ANNEXURE III

**Application for assistance from Chief Minister's Sainik welfare fund to the parents
Defence personnel killed in action**

1. Name and address of applicant :

2. Name and address of applicant spouse :
(state whether alive or not)

3. Name, Regimental Number, rank etc. of the :
Deceased defence/Para Military/GREF
Personnel

4. Relationship with the soldier :

5. Whether certificate from Revenue :
Authorities to prove that the applicant
Was the dependent of the deceased
Personnel, is produced.

Place

Signature:

Date:

Name: