

FINANCIAL CONDITION REPORT

Particulars of Ex-servicemen and his family for grant of Financial Assistance from Raksha Mantri's Discretionary Fund)

1. Name of the Applicant / Ex-servicemen_____
2. Service No. _____ Rank_____
3. Address: _____
4. Date of (a) Enrolment _____ (b) Discharge_____
5. Reasons for discharge: _____
(As given in Discharge Document)
6. Character at the time of Discharge _____
7. In case of dependent, mention _____
Relation with the Ex-servicemen
8. Date of death of Ex-servicemen _____
(If applicable)
9. Particulars of family members:-
(Details of all the children to be covered)

Ser No	Name	Relationship with the Ex-servicemen	Whether dependent / independent	Age	Occupation/ Monthly

10. Detailed report on the financial condition of the petitioner / petitioner's family:-
 - (i) Was / is the Ex-servicemen in receipt of pension : Yes / No
 - (ii) Is the applicant in receipt of pension : Yes / No
 - (iii) Individual Pension / Service Pension / Family Pension / Invalidment Pension / Board Pension
 - (iv) Total emoluments : Basic Rs _____
Insurance Relief Rs. _____
Total Rs _____

- (v) Other terminal benefits at the time of requirement (such as Group Insurance Rs. _____
Gratuity, Enhancement of leave) Rs. _____
- (vi) Land holding, if any _____
Annual income from the land Rs. _____
- (vii) Income from any other source : Rs. _____
Such as rented houses, others)
- (viii) Present employment and income there from _____
- (ix) If reply to Para 10 (viii) is NIL, mention how he/ she is maintaining his / her family

- (x) Whether in receipt of second pension
(From re-employment, if yes, state amount Rs _____)

11. Is / Was the Ex-servicemen re-employed _____

12. If not, what was the source of income after retirement of the Armed force____

13. Financial Assistance received from various other sources Rs. _____
(Details of Financial Assistance (received from KSB, RSB, ZSB for any purpose in the post)

14. State whether financial assistance received from any source for self-employment (if any) was utilized for the purpose. _____

15. Nature of Financial Assistance required _____
(Applicant/ ZSB, is required to fill up the particulars given below in respect of the nature of financial assistance required only).

16. Assistance to old and infirm Ex-servicemen / Widow (Rs. 500/- per month for two years)

- (i) Whether the ESM / dependent is in receipt of old age / WW – II pension / financial assistance given by the state govt. under various state govt. schemes.
- (ii) If not eligible for old age / WW – II Pension / FA under any state Govt. scheme, the reasons thereof : _____

17. **Financial Assistance for Daughter's Marriage (Rs. 8000/-)**

- (i) Actual date of solemnization _____
- (ii) Whether confirmation certificate
Marriage Invitation Card Attached: _____

- (iii) How the marriage expenditure was met _____
- (iv) Details of loan taken for the purpose if any , and amount still outstanding Rs.

18. **Medical Reimbursement (Up to a maximum of Rs. 15,000/-)**

- (i) Whether the applicant approached MH / Govt. Hospital for treatment _____
- (ii) If so, whether a copy of MH / Govt. Hospital reference enclosed _____
- (iii) If not, the reasons for not approaching MH / Govt. Hospital _____
- (iv) If re-employed , details of medical benefit Schemes, if any , available with the re-employer _____
- (v) Whether the applicant is member of AGI / AFGI Medical benefit scheme? if so, the AGI / AGFI number _____
- (vi) Whether summary of medical bills enclosed _____
- (vii) Whether summary of medical bills enclosed _____
- (viii) Details of financial assistance provided from State Govt. funds in the instant case. if not reasons thereof _____

19. **Grant for Children Education (Rs. 100/- per child for maximum of Children upto std) PER MONTH**

- (i) Particulars of child / children from whom the education grant is applied for :

Ser No.	Name	Name of School	Class in which studying	Year

2. Whether certificate obtained from the concerned school confirm date of birth and above details have been enclosed _____

3. Whether in receipt of scholarship / stipend for education from any other source_____

20. **Grant of House Repair (Upto a maximum of Rs. 10,000/-)**

- (i) Cause of Damage_____
- (ii) Estimate cost of repairs Rs. _____
- (iii) Whether certificate obtained from Gram Pradhan's enclosed

- (iv) Whether any relief given by the state / Govt. / Any other authority. if not reason thereof _____

21. Specific recommendation of secretary, Zila Sainik Board:-

Date:
Office Seal

Signature
Designation

Note: The cases of Financial Assistance from RMDF are processed on the basis of information / particulars furnished in the FCR form by the ZSB. The Zila Sainik Welfare Officers should ensure that the information / particulars given in the form are correct and in accordance with the discharge certificate and other documents.