DISCHARGE RECEIPT FOR PAYMENT UNDER Y.S.R. BIMA NATURAL DEATH CLAIM

	Bank Account No. of N le:		······································
Bank Nar	ne:	Branch	Name:
I / We		do ŀ	nereby acknowledge receipt from the Y.S.R. BIMA, a
sum of Rs.	/- (Rupees		Only) in full satisfaction and discharge of all
our claim/s unde	r the above scheme o	n the life of Mr. / Ms	
Dated at	This	day of	2021.
			Revenue stamp
		(Signatur	e of the Nominee / *Nominee / Claimant)
Witnesses:(Signa	ature, Name & Address	s)	
1)			
2)			
3)			
Details of Nomin		e of nominee is minor):	
Malaila Na			
		Email ID:	
_		:	
Bank Name:		Branch Name:	
			(Signature of the Nominee / *Nominee / Claimant)