

**GENERAL MOHYAL SABHA (REGD.)**  
**A-9, Qutab Institutional Area, Jeet Singh Marg, New Delhi-110067**

**Continuation of Financial Aid for the period 01/04/201... to 31/03/201... to widows who were granted Financial Aid during the year 201...-201...**

1. Name of applicant : .....
2. Address with Phone Number : .....

I, Smt..... widow of late Shri.....resident at the address indicated above do hereby declare that there has been no material change in my circumstances as communicated in my application for the grant of financial assistance during the year 201...-201... I request that the financial assistance may please be continued to me for the period 01.04.201... to 31.03.201....

**Date :** ..... **Signature of beneficiary.....**

**PART-II**

**Verification certificate from the Local Mohyal Sabha.**

We certify that the particulars and facts stated by the applicant have been verified and found correct. It is recommended that the application may be considered for the continuation of Financial Aid by the GMS during the Financial Year 201...-201....

**Signature of (President)**

Mohyal Sabha .....

Name.....

Address.....

Phone Number.....

Date.....

**Signature of (Secretary)**

Mohyal Sabha.....

Name.....

Address.....

Phone Number.....

Date.....

**PART-III**

**Verification Certificate from two prominent Mohyals who are either Patron/Partisht/GMS Life Member/MMT, where Local Sabha does not exist**

We certify that the particulars and facts stated by the applicant have been verified and found correct. It is recommended that the application may be considered for the continuation of Financial Aid by the GMS during the Financial Year 201...-201....

**Signature**

Name.....

Whether Patron/Parthisht/GMSLM/MMT

Address.....

Phone No.....

Date.....

**Signature**

Name.....

Whether Patron/Parthisht/GMSLM/MMT

Address.....

Phone No.....

Date.....

**Note: If pension is required through Bank then fill and send application in following format every second month in the GMS office.**

1. Name of Bank with address : .....
2. Account No. and type of A/C Saving or Current : .....
3. IFSC No. of Bank : .....

**PART-IV**

**Recommendation of Finance Advisory Committee of GMS.**