

Kumari Bank Retirement Fund. Bagbazar, Kathmandu			Date:		
_	reimbursement o	f mou	rning allow	ance.	
Dear Sir/ Madam, This is to inform you that my father for the mourning allowance as per issue cheque /credit the proceed it Kumari Bank Ltd.	the rule of the K	umari	Bank Retin	rement Fund .Ki	indly request you to
Name of Account Holder (Applicant PF/RF/GF Account Number:	on): Pan No:			Right	Left
Signature of Account Holder(Appl	icant)				
	F1	Employer Institution		Recommendation of  Kumari Bank Branch	
Signature: Name: Designation: Seal of Institution:	Employer	msuu	uuon	Kuman	Bank Branch
Note:					
<ol> <li>If husband/wife both claimed within 45 da</li> <li>Should be regularly a</li> <li>Documents to be sub</li> </ol> (I) Copy of death certificate	ays from the date of contributing from	of exp	iry of paren ear to claim pasis:	ts.	•
(i) Copy of death certificate		(111)	Copy of fer	ationship certificat	.e
(II) Copy of citizenship of contributor		(IV)	Other docur	r documents if required.	
For Ku	mari Bank Retir	l ement	Fund's use	e only	
On the basis of documents provid has decided to reimburse Rs 8,500 provide mourning allowance to its	ed by account ho 00 by deducting	lder/co	ontributor .		
Prepared by	Checke	d by	_	-	Approved by