

PAKISTAN AGRICULTURAL RESEARCH COUNCIL

Directorate of Establishment

Plot No. 20, Sector G-5/1, Islamabad.

LIFE CERTIFICATE

(Note: This certificate is to be furnished on or before 10th March and 10th September of each year to the concerned bank/ as well as the department concerned, i.e. PARC (O&M Section) in person or through representative or by post/courier service.)

B.F. BENEFICIARY'S PARTICULARS (to be filled by beneficiary):

1. Benevolent Fund (B.F.) No.: _____
2. Name of Beneficiary: _____
3. Relation with Ex-Employee: _____
4. Name of Ex-Employee: _____
5. Designation at Retirement/Death: _____
6. Place of Last Posting: _____
7. **Beneficiary's Signature:**

1.	2.	3.
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8. Address: _____
9. Mobile Phone No. _____ 8. CNIC No. : _____

To be filled by Attesting Officer:

This is to certify that Mr./Mst./Mrs./Ms. _____
S/o, W/o, D/o, _____, who is PARC
benevolent fund beneficiary, as per above particulars and whose specimen signatures /
thumb impression are appended above is alive till date

**(Signature of Attesting Officer
with date and Stamp with Name)**
CNIC No.: _____
Phone No. _____

Note.

1. Copy of CNIC of both the beneficiary and the Attesting Officer may be enclosed. In case of expired CNIC the certificate will not be accepted.
2. All above columns are require to be properly filled. In case of any blank column the certificate will not be accepted.
3. Attesting Officer may affix his 'Stamp with Name' and 'Signature with Date', otherwise the certificate will not be accepted.

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Directorate of Establishment

Plot No. 20, Sector G-5/1, Islamabad.

NO MARRIAGE/NO RE-MARRIAGE CERTIFICATE

(Note: This certificate is to be furnished on or before 10th March and 10th September of each year to the concerned bank/ as well as the department concerned, i.e. PARC (O&M Section) in person or through representative or by post/courier service.)

B.F. BENEFICIARY'S PARTICULARS (to be filled by Beneficiary):

Declaration: I hereby declare that I have not been married/ re-married till today _____.

My particulars are as follows: -

1. Benevolent Fund (B.F.) No.: _____
2. Name of Beneficiary: _____
3. Relation with Ex-Employee: _____
4. Name of Ex-Employee: _____
5. Designation at Retirement/Death: _____
6. **Beneficiary's Signature:**

1.	2.	3.
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To be filled by Attesting Officer:

This is to certify that Mst./Mrs./Ms. _____ W/o, D/o, _____, who is PARC Benevolent Fund's beneficiary, as per above particulars and whose specimen signatures / thumb impression are appended above is personally known by me and is **not married/re-married** till date _____

**(Signature of Attesting Officer
with date and Stamp with Name)**

CNIC No.: _____

Phone No. _____

Note.

1. Copy of CNIC of both the Beneficiary and the Attesting Officer may be enclosed. In case of expired CNIC the certificate will not be accepted.
2. All above columns are require to be properly filled. In case of any blank column the certificate will not be accepted.
3. Attesting Officer may affix his 'Stamp with Name' and 'Signature with Date', otherwise the certificate will not be accepted.