AFFIDAVIT

To be submitted at the time of sanction of missing credits from General Suspense. I Son of resident of Do hereby solemnly and sincerely state as under: 1. I am working in Department of Government of A.P. presently as/ * I have retired from the services of the Government of A.P. having worked, as in Department and Treasury. I have contributed by way of deduction from my salary the premiums payable by me in respect of my Insurance Policy No. under the scheme. I have paid loan and premium installments by way of deduction from my salary. But it is found that certain amount of various premiums / installments totalling to Rs. deducted during the periods found not credited or shown is the records of A.P Government in respect of the said policy. I, therefore request to give credit of the aforesaid amount of Rs..... 3.(RupeesOnly) to my account in respect of the said policy consequently. I request you to make total payment in respect of the said insurance policy inclusive of the aforesaid amounts as a consequence of my retirement / or recognation / termination of service / or maturity of the said policy. 4. I hereby agree to Indemnify the Government or the Governor of Andhra Pradesh for any loss or damage that they may be incurred, by virtue of making the aforesaid payments and I about myself to pay the aforesaid sum of Rs..... or any part thereof to the Government or Governor with interest, loss, damages and costs of all kinds in the event at any time it is found that no deduction or deductions were made from my salary asmentioned above in respect of the aforesaid policy. I further agree in consideration of the aforesaid granting or making any payment of any nature that the aforesaid amount or amounts will be paid back by me or can be deducted in monthly installments from my salary/ or pension / or as may be ordered by the Director of Life Insurance of A.P. Government or the said credit or credits given to

me be cancelled or recovered in the event it is found at any time that the aforesaid

amounts or any part thereof was not deducted from my salary.

6.	I further agree that if the Government suffers any loss, I shall make up the
same and i	n the event of any default on my part the Government shall be at liberty to
recover su	ch amount or loss from me in person or from my property under the provisions
of Hyderal	oad Government Demands Act or under any other law for the time being in for
be on that	behalf.

	DEPONENT
Sworn and signed his name in my Presence at ()	
On this	

Before No.

Advaan to.

- Note: 1. Attestation to be done by an Advocate or 1st Class Megistrate or Gazetted Officer of Andhra Pradesh in Government Service.
 - 2. * Strike off whichever is not applicable.