FORM NO. V Government of Sikkim

Department /Office	
Dated	•••••
То	
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•••••••••••••••••••••••••••••••••••••••	
Subject: Payment of the amount due under the Sikkim Governmen Group Insurance Scheme, 1993.	t Employees'
Dear Sir/Madam,	
I am directed to state that late Shri	
has nominated you for payments of full /	
percent of amounts due under the Sikkim Government Employees Grou	p Insurance
Scheme, 1993. You are, therefore, requested to submit an application in	the enclosed Form
No.6 for arranging payment.	
Yours faithfully,	
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Designation of Head of Officer/Head of Department/
Any other Officer

^{*} Name and address of Nominee to be indicated