

**Duly filled and attested copy of this certificate in original is to be submitted to the Trust by 31<sup>st</sup> July, 2020.**

**ICSI Employees Pension Fund Trust**

**TO WHOMSOEVER IT MAY CONCERN**

**ALIVE CERTIFICATE FY 2020-21**

This is to certify that Shri/Smt./Km.-----

whose particulars are given below, is alive as on -----(indicate the date)

Father's/husband's Name :-----

Date of Birth :-----

Present Address :-----

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Mobile No. :-----

E-mail ID :-----

Signature of the Pensioner:

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Attested by :-----

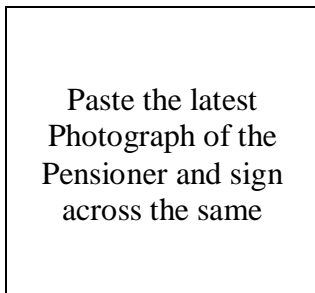
Signature :-----

Name :-----

Designation:-----

Address :-----

:  
:



**Note: (1) Attestation should be done by any one of the Gazetted Officer, Bank Manager, Post Master or Member of ICSI.**

**(2) Email may be send to [accounts@icsi.edu](mailto:accounts@icsi.edu).**