## (ON NON JUDICIAL STAMP PAPER OF RUPEES TEN)

## AFFIDAVIT / DECLARATION (LOSS OF SMART CARD / RECEIPT)

I, (Nar	me)	s/o,	
Resid			
Servic	ce Noof	Rank	
Unit		solemnly affirm and d	eclare as follows:-
9	That I have lost my ECHS Smart Ca		
is	·		
2.	That I will be responsible for ar	ny loss / expenditure	incurred to the Govt,
conse	equent to the misuse of the Smart Ca	rd (s) / Receipt lost by n	ne, in the interim period
	applied again for duplicate Card (s).		
3.	That in case I ever find my lost ECH	HS Card (s) / Receipt I s	hall return the same to
neare	est Station Headquarters / ECHS Reg	gional Centre immediate	ly.
			DEPONENT
	VERI	FICATION	
I, the	e Deponent above named, do hereby	solemnly declare and ve	erify that the contents o
	above affidavit are true to the best of r		
	n concealed or suppressed therefrom.		
	Verified at (Place)	on this (date)	1
		, , , , , , , , , , , , , , , , , , , ,	

DEPONENT

## PAGE TWO

Signature of Deponent

## ATTESTATION

Certified that the	above statement is declared before me at	(Place)
	by DEPONENT (Name)	
-		
Service No	Rank	
		r
IDENTIFIED BY		
Signature of Identifier		
(Name in Block Capitals)		
(Full Postal Address)		
5		
	A C	
WITNESS NO 1		
Signature of Identifier		
(Full Postal Address)		
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		_
WITNESS NO 1		
Name in Plack Carital V		_
		<u>-</u>
ruii Postai Address)		_

Attested by Magistrate/Notary Public