



## Life Insurance Corporation of India

### Pension & Group Schemes

Address of the P&GS Unit

Phone nos:

Email id:

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### Discharge Receipt

**Master Policy No:** -----

We, -----do hereby acknowledge receipt from Life Insurance Corporation of India, the sum of Rs ----- ( Rupees ----- only) , in full satisfaction and discharge of all our claim/s and demands under the above master policy on the life/ lives of member/s as detailed in the list / statements sent herewith/ given below

Dated at -----this ----- day of -----20

#### Witness

Signature : \_\_\_\_\_  
Name : \_\_\_\_\_  
Designation : \_\_\_\_\_  
Address : \_\_\_\_\_

Please Affix  
a Re.1/-  
Revenue  
Stamp

Signature of the MPH  
(With Seal)