

ICSI Employees' Pension Fund Trust

TO WHOMSOEVER IT MAY CONCERN

ALIVE CERTIFICATE FY 2026-27

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 :-----

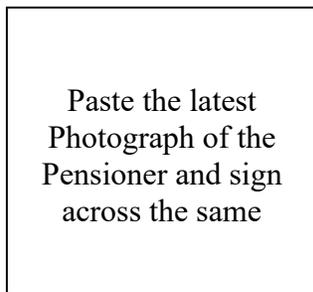
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Mobile No. :-----

E-mail ID :-----

Signature of the Pensioner:



Signature :-----

Date : -----

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) Attestation should be done on or after 1st April, 2026 only and should reach in hard copy this office by 10th April, 2026.