

LIFE CERTIFICATE

TO WHOM IT MAY CONCERN

This is to certify that _____ S/O _____
ARMY No. _____ CNIC No. _____ whose
specimen signature / thumb impression and address are appended below is alive on the
date _____.

Pensioner Signature / Thumb impression

Address

Phone No. _____
(City Area Code)

Signature of Attesting Officer

Address

Phone No. _____
(City Area Code)

**Note: This certificate is to be signed by Class-I Gazzetted Officer / Military
Commissioned officer or as authorized under FTR-343**