

**FORM NO.4D**  
**NOMINATION FOR D.C.R.GRATUITY**  
*(Referred om Rule76(a), Part III,KSR)*  
**(When the Officer has no family)**

I, having no family, hereby nominate the persons mentioned below and confer on them the right to receive, to the extent specified below, any gratuity that may be sanctioned by Government in the event of my death while in service and the right to receive on my death, to the extent specified below any gratuity which having become admissible to me on my retirement may remain unpaid at my death.

Name and Address of Nominees	Relationship with the employee	Age	Amount or share of gratuity payable to each (*)	Contingencies on the happening of which the nomination shall become invalid	Name and address and relationship of the person or persons, if any, to whom the right conferred on the nominee shall pass in the event of the nominee pre-deceasing the employee or the nominee dying after the death of the employee but before receiving payment of gratuity	Amount or share of gratuity payable to each. (**)
1	2	3	4	5	6	7

This nomination supersedes the nomination made by me earlier on ..... which stands cancelled.

**N.B The Officers should draw lines across blank space below the last entry to prevent the insertion of any name after he has signed.**

**Dated this.....day of .....200 .....at.....**

**Witness to signature:-**

(1).....

(2).....

**Signature of employee**

(\*)This column should be filled in so as to cover the whole amount of gratuity. If only one person is nominated, the words "full" or "hundred percent" shall be indicated in the column.

(\*\*) The amount/share of gratuity shown in this column should cover the whole amount/share payable to the original nominees.