



# EMPLOYEES' STATE INSURANCE CORPORATION

REG. FORM – 22

## FUNERAL EXPENSES CLAIM FORM

(Regulation 95E)

Claim arising out of death on ..... of ..... s/w/d of .....  
....., aged ..... years, having Insurance No. [ ] [ ]  
and last employed as ..... by  
M/s. .... Code No. ....

I ..... s/w/d/ of ..... aged  
..... years declare: -

**\*i) that I am the eldest surviving member of the family of the deceased Insured Person, whose particulars are furnished here-in-above, and that I actually incurred an expenditure of Rs. .... (Rupees ..... only) necessary for the funeral of the said deceased person.**

or

**\*ii) that the deceased Insured Person, whose particulars are furnished there-in-above, did not have a family/ was not living with his family at the time of his/ her death and that I actually incurred an expenditure of Rs. .... (Rupees ..... only) on the funeral of the deceased Insured Person.**

Accordingly, I do hereby claim funeral expenses for the amount of Rs. ....  
(Rupees ..... only).

Date .....

Name in Block  
Letters .....

Signature/ Thumb-impression  
of the Claimant

### ATTESTATION

\*\*Certified that the declarations, as made here-in-above, are true to the best of my knowledge and belief.

Name in block letter and  
Rubber Stamp or Seal of  
the Attesting Authority

Signature .....  
Designation .....  
Date .....

\*Delete either (i) or (ii), which may not be applicable in the case.

\*\*This certificate is to be given by (i) an officer of the Revenue, Judicial or Magisterial Department; or (ii) a Municipal Commissioner; or (iii) a Workmen's Compensation Commissioner; or (iv) the Head of gram Panchayat under the official seal of the Panchayat, or M.L.A./M.P.; or (v) **A Gazetted Officer of the Central/ State Govt., Local committee/Regional Board** or (vi) **any other authority considered as appropriate by the Branch Manager concerned.**

**Important:** Any person who makes a false statement or representation for the purpose of obtaining benefit, whether for himself or for some other person, commits an offence punishable with imprisonment for a term which may extend up to six months or with a fine up to Rs.2,000/-, or with both.

**NOTE:-** In the case of a minor, the guardian should sign the claim form on behalf of the minor and then add the following below his/ her signature : -

..... (Name of the Minor)

Through ..... (Name of the Guardian)  
his/ her ..... (Relationship with the Minor)