



## PENSIONERS DATA VERIFICATION FORM

NAME OF PENSIONER			
PENSION NUMBER		GHANA CARD ID NO.	
INSTITUTION		GRADE / JOB	
BANK			
BRANCH		ACCOUNT NO.	
DATE OF BIRTH		DATE OF RETIREMENT	
PHONE / CONTACT NO.			





## WIDOWS AND DEPENDANTS DATA VERIFICATION FORM

PENSION NUMBER		GHANA CARD NO.	
NAME OF DECEASED		DEATH OF DECEASED	
INSTITUTION		GRADE / JOB	
GUARDIAN			
BANK			
ACCOUNT NO.		BRANCH	
CONTACT NO.			
CHILDREN (1)		DATE OF BIRTH	
2)		DATE OF BIRTH	
3)		DATE OF BIRTH	
4)		DATE OF BIRTH	
5)		DATE OF BIRTH	
6)		DATE OF BIRTH	



**CAGD PENSIONS DIRECTORATE  
DATA VERIFICATION RECEIPT**

NAME OF PENSIONER / WIDOW / GUARDIAN:	
PENSION NO:	
GHANA CARD NO:	
DEPARTMENT / RANK:	
DOCUMENTS RECEIVED AND VERIFIED BY:	
SIGNATURE OF OFFICER:	
DATE OF SUBMISSION:	

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