

Society for Elimination of Rural Poverty 2nd Floor, NTR Administrative Block, RTC House, Vijayawada – 520001, Andhra Pradesh



Date: 07 /02/2017

Proceedings of Chief Executive Officer, SERP Present: Dr P.Krishna Mohan Ph.D

Proc. No.183-6/SERP/SSU/Claims/2017

Sub:- SERP-Implementation of AABY -Settlement of Claims by LIC of India- Funds transfer to concerned Nominee accounts and Refund of Rs 5,000 to ZS amounting to

Rs 29999– Orders Issued.

Ref: - 1. Data Updated in the AABY website by LIC of India.

2. Proc No 183 /SERP/SSU/Claims/2016 Dated: 26/10/2016.

In continuation of the proceedings referred above, it is to inform that 1 accounts of Nominees has been verified and Zilla Samakhyas have confirmed the status of Rs 5000 payment to Nominees.

The cheque wise claim amount with transaction status received from LIC for 1cases has been tabulated for ready reference.

Cheque No	Cheque Date	Transaction ID	Transaction Date	Scheme	No of claims	Cheque Amount
40	05/10/2016	ICICR52016102000798590-1	20/10/2016	AABY	1	30000
					1	30000

The details of the Claims settled by LIC, Nominee Account Particulars and the amount to be transferred to Zilla Samkhyas is shown in Annexure 1 &2 respectively for transferring the claim amount of Rs 24999 to the 1 Nominees Accounts directly after deducting Rs 1 rupees initial paid (@Rs 1/- per claim) and Rs 5000/- to Zilla Samakhyas as reimbursement for Rs 5000 paid through EFMS.

In view of the above sanction is here by accorded for transfer of an amount of Rs.29999/-(Rupees Twenty Nine Thousand Nine Hundred Ninety Nine only) to Nominees & Zilla Samakhyas as per the Annexure 1&2 enclosed through EFMS from the funds available in A/c No: 62344242846 SBH, Adarsh Nagar branch.

Sd/- P.Krishna Mohan Chief Executive Officer

To The DDO,SERP

Copy to TCS EFMS team with a request to prepare the file in EFMS format and send the same to SBH, Adarsh Nagar.

Copy to The Manager, SBH Adarsh Nagar with a requestto transfer the amounts to the Accounts as per the file submitted by TCS.

Copy to Zilla Samakhyas.

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Annexure:1- Details Of Nominee Accounts

SlNo	Scheme	LICID	Policyholder	Nominee	Account no	Bank Name	IFSC Code	Amount
1	AABY	6409685	Kota Perayya	Kota Chinnapapa	32191268542	State Bank Of India	SBIN0008819	24999
East Godavari District Total:								24999
Total Amount: 24								24999

<u>Proc.No.183-6/SERP/Insurance/Claims/2017</u> Annexure 2: Details of Zilla Samakhya Accounts

S.No	Zilla Samakhya Insurance	Account Number	Name Of The	Branch Name	IFSC Code	Amount	No.Of
	Bank Account Name		Bank			(In Rs.)	claims
1	ZILLASAMAKHYA INSURANCE(SERVICE	144010100004951	Andhra Bank	COLLECTORATE BRANCH KAKINADA	ANDB0001440	5000	1
	CHARGES)E.G.DT.,KA						
Total							1