



ଭୁବନ୍ଦ୍ର ସମ୍ପଦ ଏତାନ୍ତିକ ବିଭାଗ  
ROYAL GOVERNMENT OF BHUTAN  
Bhutan Narcotics Control Authority  
Thimphu: Bhutan



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**DECLARATION OF DEFENDANTS**

(F2)

1. I, Mr./Ms.....hereby declare that the names mentioned hereinafter are my dependants/ parents/children/legally adopted children as per the laws of the land.
  - a. Spouse.....M.C No.....
  - b. Father.....CID card No.....
  - c. Mother.....CID card No.....
  - d. Father In-law..... CID No.....
  - e. Mother In-law..... CID No.....
  - f. Children 1.....CID No.....
  - g. Children 2.....CID No.....
  - h. Children 3.....CID No.....  
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  - i. Legally adopted children.....CID No.....

2 In the event of their demise, benefits as defined under the Scheme may be given to me.

3 I hereby nominate and authorize Mr./Ms.....the right to receive the entire amount that may be payable to me by the Scheme in the event of my death.

The above mentioned declarations are all true and correct to my knowledge.

**Signature/ Name and Designation.**

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**OFFICIAL USES ONLY**

Verified by:

Endorsed by:

**Focal Person**  
Staff Welfare Scheme

**Chairperson**  
Staff Welfare Scheme.