

No: E/WL/SBF/MLDT/Pt.XIV(Loose),

All Concerned
Malda Division.

Sub:- Grant towards Relief-in-Distress for the year 2025-26.

Ref:- Sanction of Secretary/CSBF:- SBF.119/2/Pt.VIII,
dtd. 16.04.2025.

Enclosed please find herewith a proforma for submitting Financial Assistance from CSBF grant towards **Relief -in- Distress** to the all non-Gazetted Railway employees, irrespective of Grade Pay/Level of Pay in Pay Matrix for the year 2025-26 as directed by Secretary/CSBF, Eastern Railway, Kolkata vide letter under reference.

The eligible and intended employees of Malda Division may apply in the prescribed proforma duly filled up in all respect to this office (Welfare Section) through Proper Channel.

All the unit In-Charges are requested to send all the applications in bunch, alongwith a list of names of applications within **31.12.2025** positively to the Sr.DPO's Office (Welfare Section).

No piece meal application will be entertained by this office.

DA:- As stated.

(K.Samanta, APO-I)

For Sr.Divisional Personnel Officer
Eastern Railway/Malda

Copy to :- All Branch Secy. ERMU, ERMU & ALSCSTREA for information.

For Sr.Divisional Personnel Officer
Eastern Railway/Malda

Malda Division
Divisional Area Staff Benefit Fund Office
Application form for Assistance towards Relief-in-Distress 2025-26
(Last Date of Submission 31.12.2025)

To,
Chairman Divisional Staff Benefit Fund Committee
Otherwise Sr.Divisional Personnel Officer,
Eastern Railway, Malda

I, (Name in Block letters) -----

Design.-----Office-----Basic Pay-----Pay Level-----

-----PF No.-----Mobile No-----,beg to apply for an

assiatance of Rs.-----towards relief in distress on medical ground.

Reasons for application in details :- a)Name of Patient ----- b)

Relationship-----c) Name of disease-----

----- d) Name of Hospital-----

e)Reason for non-availing Railway treatment-----

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f)Whether re-imbursement made by Railway or under consideration-----

g) Whether any amount received from other source/Mediclaim etc.-----

(Medical documents and current medical vouchers etc. from _____, 2025 onwards in original

alongwith summery of the expenditure are to be attatched with the form)

(Signature of the applicant)

BILL UNIT No. ----- PF A/C No.-----

(Xerox copy of Pay Slip must be enclosed)