

NOTICE

Dated, Motihari the 12th January 2026.

As directed, all the Judicial Officers posted in this Judgeship /Retired Judicial Officers from this Judgeship, are hereby requested to kindly fillup the format attached with this Notice, regarding details of **Cashless Treatment** and send the same to this office, at the earliest, for needful.

Dec 12/1/26
Administration Incharge,
Civil Court, Motihari.

JUDGESHIP OF MOTIHARI (EAST CHAMPARAN)

Proforma of Health Card for Cashless Treatment

Name of the Judicial Officer						Paste a recent colour passport size photograph	
Whether in Service or Retired							
Date of entry in the service							
Date of Superannuation							
Designation		JO Code				Signature	
Present place of posting (only for serving officers)							
Permanent Address							
Present Address							
<u>Details of Benefeciaries</u>							
	Name	Relation	Gender	Date of Birth	Blood Group	Whether in service or Not. (If in Service, whether in Govt. or Pvt. Sector)	Aadhar Card Number
Self							
Spouse							
Dependent Family Members							
Dependent Family Members							

This is to certify that the above data is correct to the best of my knowledge.

Signature of the Judicial Officer