

Pension (1897) Department.

ORDINARY MS.

G.O., No. 94

DATED 5-2-97.

[Despatch Abstract.]

Granting an invalid gratuity
of Rs. 200/only to P. Moonesamy,
late Cook, Govt Ophthalmic Hospital
Madras.

BACK PAPERS.

G.O.	No.	Department.	Date.	G.O.	No.	Department.	Date.

FURTHER PAPERS.

G.O.	No.	Department.	Date.	G.O.	No.	Department.	Date.

[A.]
500-7-8-06.

List

C. No. 59
PENSION DEPARTMENT.

PROCEEDINGS OF THE MADRAS GOVERNMENT.

READ the following papers:—

From the S. G. with the Govt. of Madras dated 17th Dec^r 1896, No. 6402

Certificate and report from the Accountant-General, dated 23rd Jan^y 1897, No. ^{A.D.J.} 554

ORDER THEREON, 5th Feb^r 1897 No 94.

Character - Good

Please see precedent put up -
- G.O. ⁴²⁸ 7.5.80 Pension.

Under articles 455 & 524 (a)
of the Civil Service Regulations (2nd Edition),
His Excellency the Governor in Council is
pleased to grant to Poodoopottium Mos-
-nooswamy, late cook, Govt.
Ophthalmic Hospital, Madras,
an invalid gratuity -

Forty only of Rupees (40/-)
payable at Madras
from—
in consideration of his qualifying inferior
service of 18 years, 7
months and // days.

To the Accountant-General, with Register.
" " S. G. with the Govt. of Madras

ks
3297

10
5-287

APPLICATION FOR PENSION OR GRATUITY.

1. Name of Applicant. *Prodaspallium Moonoswamy*
2. Father's name. *Prodaspallium Chenzalray Vaiden*
3. Race, Sect and Caste. *Balja, Hindu*
4. Residence showing Village and Pergunnah. *Royapuram, Madras*
5. Present or last employment, including name of establishment. *Coch. Govt. Ophthalmic Hospital, Madras.*
6. Date of beginning of service. *2nd May 1878*
7. Date of ending of service. *12th Decr 1896*
8. Length of service, including interruptions

	Y.	M.	D.
	18	7	10
of which superior	..	..	Nil
inferior	..	..	18-7-10
non-qualifying and interruptions	..	..	Nil
9. Class of pension or gratuity applied for, and cause of application. *Gratuity, invalided*
10. [Average] emoluments or pay. *Rs 8-0-0 per month*
11. Proposed pension. *Nil*
12. Proposed gratuity. *5 months pay*
13. Date from which pension is to commence. *"*
14. Place of payment. *Madras*
15. Date of Applicant's birth by Christian era.† *10th January 1838*
16. Height. *5 ft. 6 1/2 in*
17. Marks. *An oval scar on the left side of back; a circular scar in front of right thigh; a small mole on the right side of the upper part of the nose; perpendicular tattoo line on*
18. Date. *12th Decr 1896*

If the application is for a compensation, pension or gratuity, the nature of the change of establishment which has given rise to the claim should be fully stated.

† (If not known exactly, must be stated on the best information or estimate.)

[Signature]
 Superintendent, *Ophth. Hosp.*
 SIGNATURE OF HEAD OF OFFICE.

HISTORY OF THE SERVICE (SHOWING INTERRUPTION) OF

Establishment.	Appointment.	Pay.	Acting allowance.	Date of beginning.	Date of ending.	Period reckoned as service.	Period not reckoned as service.	Remarks.	How verified.	Remarks by the Audit Officer.				
Genl-Opthalmic Hospital, Madras.	Capt R S	8	RS.	2nd May 1878	12th Dec 1896	Y. M. D. 18 7 18	Y. M. D. 18 7 18	From service on record in this office & Regular Roll	Verified from the records of Superintendent the office of the Opthalmic Hospital, Madras and the verification from 1880 confirmed by reference to the Annual Returns to the Annual Returns	26 JAN. 97				
Total period of Superior Service ..						18 7 18	18 7 18							
Inferior Superior Service ..														

REMARKS BY HEAD OF OFFICE.

- As to character and past conduct of Applicant. *Good*
- Explanation of any suspension or degradation. *Nil*
- Regarding any gratuity or pension already received by Applicant. (See Chapter XXI). *Nil*
- Explanation under Article 469 so far as the Head of the Office can give it. *Unfit for further service*
- Any other remarks. *Nil*
- Specific opinion of Head of Office whether the service claimed is established and should be admitted or not [See Article 991]. *Service established and claim should be admitted*

CERTIFICATE AND REPORT OF THE AUDIT OFFICER (1).

Certified that (subject to the remarks below recorded) qualifying service in inferior or superior grades has been duly proved for 18 years 7 months and that a (pension or gratuity) not exceeding Rs. 400 per annum equal to 5 months pay is admissible under Articles 485 and 524 (a) of the Civil Service Regulations. The calculations have been duly verified. The (pension or gratuity) is chargeable to (here specify whether to General Revenues, or to what Fund). In accordance with Rule 3 under Article 994 (b) the attention of government is respectfully invited to Article 516 of the Regulations.

For the purpose of the office

23rd January 1907

Sd/- M. V.

The Under Secretary to Government
Revenue Department

5574

S. H. M. V.

For the Audit Officer.

(1) In the case of Civil Engineers and Telegraph Officers who are eligible for the additional pensions authorized in Article 714, the following addition should be made to the usual form of Certificate:—
He has served for three years as (Chief Engineer, Superintending Engineer, &c., as the case may be) and is eligible for a special additional pension of Rs. 1,000 2,000 if he is considered to have rendered "approved service" under Article 714 of the Civil Service Regulations.

APPLICATION FOR PENSION OR GRATUITY—

Date of Application.

Name of Applicant.

Last Appointment.

Class of pension or gratuity.

Amount of pension sanctioned.

Amount of gratuity sanctioned.

Date of Commencement.

Date of sanction.

16/7/97

Cus 59/97

16/7/97

16/7/97

16/7/97

THE ENTRIES IN THESE COLUMNS ARE TO BE REATTESTED EVERY FIVE YEARS; EACH ATTESTATION SHOULD BE CAREFULLY RULED OFF THAT THE DATE MAY BE CLEARLY SHOWN
 இந்தக்கலங்களில் செப்பிற் பதிவுகளுக்கு ஐந்தாவருஷத்துக்கொருதரம் அத்தாட்சிக் கையெழுத்துபண்ணவேண்டும்; தேதி தெளிவாய்த் தெரியும்படி அந்தந்த அத்தாட்சி கையெழுத்துக்கு ஐக்கிரையாய் கொடுப்பாடுப் பிரிக்கவேண்டியது.

Name of Officer. உத்தியோகஸ்தன் பெயர்.	Caste or Race. ஜாதி அல்லது வம்சம்.	Residence. இருப்பிடம்.	Age. வயசு.			Knee height. சரியான உயரம்.	Personal marks for identification. நபர் தெரிவதற்காக அங்குமச்சமனடையாளம்.			Date of Entry. பதிவுதேதி.	Signature of Officer. உத்தியோகஸ்தன் கையெழுத்து.	Signature and designation of the head of the Office. ஆபீசத்தலைவருடைய கையெழுத்தும் உத்தியோகப்பெயரும்.
			Years. வருஷம்.	Months. மாதம்.	Days. நாள்.							
<i>Godakallum Moosavarmy</i>	<i>Thindar</i>	<i>Rega-onam.</i>	40			Five feet	Fore head tattoo, with a small prominent mole at its lower end to the Right of the nose. An oval scar on left side of back; front aspect of left forearm tattoo with a star. a circular scar on front of Right thigh.			<i>20th May 1898.</i>	<i>Godakallum Moosavarmy, No mark</i>	<i>Godakallum Moosavarmy, No mark</i>
			14			5 6 1/2	do.			20th/83	<i>Godakallum Moosavarmy, No mark</i>	<i>Godakallum Moosavarmy, No mark</i>
			15			5 6 1/2	do.			1899	<i>Godakallum Moosavarmy, No mark</i>	<i>Godakallum Moosavarmy, No mark</i>
			56			5 6 1/2	do.			1894	<i>Godakallum Moosavarmy, No mark</i>	<i>Godakallum Moosavarmy, No mark</i>

Godakallum Moosavarmy
Godakallum Moosavarmy
Godakallum Moosavarmy

7
59

1979

(Certificate for retirement on invalid pension or gratuity.)

OFFICE OF SURGEON-GENERAL
12 DEC 96

CERTIFIED that I have carefully examined Poodoopallium

Moonooswamy
son of Chengulroya Naik

a Cook

in the Govt Ophthalmic Hospital, Madras.

His age is by his own statement 58 years and by appearance about 58 years.

I consider Poodoopallium Moonooswamy
to be completely and permanently incapacitated for further service of any kind or in
the Department to which he belongs in consequence of Cataracts in
both eyes.

His incapacity does not appear to me to have been caused by irregular or intemperate habits.

STATION Madras
Date 12 Dec 1896.

7
2
59

Name. Toode M.D., F.R.S.
Rank. Surgeon Major S.M.S.
Designation. Superintendent Ophthalmic Hospital

NOTE.—[If the incapacity is obviously the result of intemperance, substitute for the words in italics "In my opinion his incapacity is the result of irregular or intemperate habits."]

Countersigned.

Chionoshe

Madras 14 December 1896

Surgn.-Major-Genl.,
Surgeon-General with the Government of Madras.

STATEMENT OF CASE.

1. Rank. *Cook*
2. Name. *Pootropallium Moonnoosawmy*
3. Department or Office. *Govt. Ophthalmic Hospital, Madras.*
4. Marks of identification. *{ An oval scar on the left side of back; a circular scar in front of right thigh; a small mole on the right side of the upper part of the nose; perpendicular tattoo line on centre of forehead. }*
5. Age. *58.*
6. Service. *18 years 7 months and 10 days*
7. Sick leave granted during the service. *nil*
8. Disease or cause of disability. *Cataracts.*
9. Abstract statement of case showing how the disease or disability was contracted, the results of the treatment adopted. In case the disease or disability is believed to have been caused by irregular or intemperate habits, the reasons for such belief should be stated.

Cataracts in both eyes of about six months duration. R eye vision - $\frac{0.5 \text{ metres}}{\text{M. Bello eye}}$
Left eye vision - Perception of light only.
This man is practically blind. His general health is also very much impaired. I therefore consider him unfit for further service.

[3]

No. *0402*

Encl.

From

6391
SURGEON-MAJOR-GENERAL *C. SIBTHORPE, F.R.C.P.J.*

SURGEON-GENERAL WITH THE

GOVERNMENT OF MADRAS,

Madras,

To

THE *Accountant General,*

Madras.

SIR,

I have the honor to forward for submission to Government the accompanying application for gratuity on behalf of Pootropallium Moonnoosawmy, Cook, in the Government Ophthalmic Hospital, Madras.

I have the honour to be,

Sir,

Your most obedient Servant,

C. Sibthorpe

Surgeon-Major-Genl.

Surgeon-General with the Govt. of Madras.

(1896) DEPARTMENT.

From

SURGEON-MAJOR-GENL. C. SIBTHORPE, F.R.C.P.I.,

SURGEON-GENERAL WITH THE

GOVERNMENT OF MADRAS,

Madras,

No. 0402

Dated 17th }
Received } December 1896.

Subject.

Forwarding for submission to Govern-
-ment the application for gratuity
on behalf of Poodeopallium Moonoo-
-sawmy, cook, in the Government Oph-
-thalmic Hospital, Madras.

When given for copying _____
When copied _____ } 189.
When examined _____
When signed _____

READ AGAIN G.O., No.
189 ,

DATED

CURRENT No.

ENCLOSURES TO C. No.

ORDER OF GOVERNMENT

LETTER OF GOVERNMENT.

STATEMENT WITH DITTO.

PAPERS NOT FILED UP, BEING MEANT FOR DESPATCH
IN ORIGINAL.

N.B.

A = Copy in full.
B = Not to be copied.
P = Copy abstract only.
Q = Copy heading only.