MANUAL DATA COLLECTION FORM
SPECIAL REBATE CARD FOR ARMED FORCES PERSONNEL

The Caring Store

BarCode

Canteen Stores Department

Photograph to be pasted here (1 X 1 Size)

Note: All fields are mandatory.

Application Type: ☐ New ☐ Duplicate ☐ Modification

1 PA No

2 Rank

3 Corps/Services

4 Unit/Formation

Applicant Name *(As you would like it to appear on card)*

5 First Name

Last Name

6 CNIC No

7 Contact No

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