

Form B
Form of Nomination

[See Rule 5(1)]

I(Name) hereby nominate the person(s) mentioned below to receive the amount that may stand to my credit in the Fund in the event of my death before the amount has become payable or having become payable, has not been paid

Name of Nominee	Address	Gender	Relation with the subscriber	Age	Share payable to each	Contingencies on the happening of which Nomination shall become invalid	Name, Address, Relationship and age of the person to whom the right of the nominee shall pass in the event of his predeceasing the subscriber	Address of the person to whom share is to be paid on behalf of minor
1	2	3	4	5	6	7	8	9

Dated this.....day of.....at.....

Date :

Place :

Witness

(Name and Signature of Applicant)

1.

2.

Designation :

Account No :

Counter signature of Controlling officer with Office Seal

Counter signature by Head of office with Office Seal