

FORM OF NOMINATION

[See Rule 5 (3)]

Account No.

I,....., hereby nominate the person(s) mentioned below who is/are member(s)/non member(s) of my family as defined in Rule 2 of the General Provident Fund (Central Services) Rules, 1960 to receive the amount that may stand to my credit in the fund as indicated below, in the event of my death before that amount has become payable or having become payable has not been paid.

Name and full address of the nominee(s)	Relationship with the subscriber	Share payable to each nominee	Contingencies on the happening of which nomination will become invalid	Name, Address and relationship of the person(s) if any to whom the right of nominee shall pass in the event of his/her predeceasing the subscriber	If the nominee is not a member of the family as provided in Rule 2, indicate the reasons.
(1)	(2)	(3)	(4)	(5)	(6)

Dated this Day of20.....
at

Signature of the subscriber.....
Name in Block letters.....
Designation.....

Two witnesses to signature
Name and Address

Signature

- 1.
- 2.

Space for use by the Head of Office / Pay and Accounts Office

Nomination by Shri/Smt/Kumari, Designation.....
Date of receipt of nomination.....

Signature of Head of Office/ PAO

Designation
Date.....