Nomination Form

Member's Details :

Full Name : _____

Roll No: _____ Mob.No. _____

Unit/Dept.:_____ Location:_____

Date : _____

To, The Secretary, Siemens Employees' Co-Op. Credit Society Ltd.

Sub: Declaration of the Nominee.

I hereby nominate the person (s) mentioned below under the provisions of the Society Bye Laws No. D.2.2. to receive all money (Shares, MSF and deposits if any) that,

(I) In as a share holder shall be bound to be entitled to receive all money from the society in case of my death.

AND

(II) As I am a member of Death Relief Scheme and to, receive the benefits under the Members' Death Relief Scheme from the Society in case of my death.
If applicable YES NO NO

| Sr.No | Full name of Nominee(s) | Relationship with | Date of Birth | Share in |
|-------|-------------------------|-------------------|---------------|------------|
| | | member | | Percentage |
| 1 | | | | |
| 2 | | | | |
| 3 | | | | |
| 4 | | | | |

| Nominee's Address & Contact No(With ID Proof) | Guardian's Address (In case of minors) | |
|---|--|--|
| | | |
| | | |
| | | |

Signature of Member :

Witness Signature : _____

Name : _____

| R/T.No. : _ | |
|-------------|--|
|-------------|--|

Address : _____