

# FORM OF NOMINATION

GENERAL PROVIDENT FUND 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 or has not been paid.

Name and full address of the nominees	Relationship with the subscriber	Age of the nominee(s)	Share payable to each nominee
1	2	3	4

Contingencies on the happening of which the nomination will become valid

Name, address & 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 member(s) of the family as provided in rule 2 indicated the reasons.

Dated this \_\_\_\_\_ day of \_\_\_\_\_ at \_\_\_\_\_

Witness : (With name, address & signature)

1.

2.

Signature of subscriber :

Name (in Block Letters) :

Designation :

Spare for use by the Head of Officer/Pay & Accounts Office.

Nomination of Shri/Smt./Kum. \_\_\_\_\_

Designation \_\_\_\_\_

Date of receipt of Nomination \_\_\_\_\_

Signature of Head of Office/  
pay & Accounts Office.

Designation \_\_\_\_\_

Date : \_\_\_\_\_