

STATE BANK OF INDIA OFFICERS' ASSOCIATION (KERALA CIRCLE)
SOCIAL SECURITY AND WELFARE SCHEME

Date:

The General Secretary
State Bank of India Officers' Association (Kerala Circle)
Thiruvananthapuram - 695012

Dear Sir,

Name (in block letters)			
PF ID		Domicile	
Branch		Scale	
Date of Birth		Date of joining	
Joined as		Date of Promotion	
Mobile Number		E mail ID	

NOMINATION

I hereby authorise State Bank of India Officers' Association (Kerala Circle) to pay the proceeds of the scheme, if any, to my Provident Fund nominee as given by me to the Bank.

AUTHORISATION

I, hereby remit Rs.200/- as admission fee by account transfer/ is already a member of the SBIOA (KC) Social Security Scheme* and authorise you to deduct a sum of Rs.200/- or any other amount as decided by the Management Committee from time to time, per month from my salary starting from onwards as subscription to the SBIOA (KC) Social Security and Welfare Scheme and credit it to Account Number 67101040408 with SBI NAC Poojappura Branch (Branch Code: 70502).

*Strike off whichever is not applicable

Yours faithfully

Remitted Rs.	
Date :	
Journal No./ DU Number	

Signature
Name :
PF ID :