**FORM XXIX**

**(See Rule 260(7))**

**NOMINATION FORM**

I nominate the following persons as rightful dependents, to receive all the dues form the Fund on my behalf and in the event of my death, as rightful heirs to receive all benefits due to me:-

|  |  |  |  |
| --- | --- | --- | --- |
| **Name and address of Nominee/ Nominees** | **Relationship with member** | **Age of Nominee** | **Amount to be given to each Nominee** |
|  |  |  |  |

Place:

Date:

 Signature

 Name

Address: