



CANARA BANK EMPLOYEES' UNION GOLDEN JUBILEE

FAMILY WELFARE SCHEME

A UNIT OF CANARA BANK EMPLOYEES' UNION

BALAKRISHNA MENON SMARAKAM

TC 82/5376, Ambujavilasam Road, Thiruvananthapuram - 695 001
Phone : 0471 - 2472176, 0471 - 2982760, Website:cbeugjws.co.in, E-mail : cbeutvm@gmail.com



CLAIM FORM FROM THE NOMINEE FOR PAYMENT OF DEATH RELIEF

Name of the Applicant : _____

Name of the Deceased with Staff No. : _____ Staff No. _____

Relationship with the Deceased : _____

Address : _____

Date of Death : _____ Whether proof of death submitted : Yes / No

I Sri. / Smt. / Kurn. _____ Nominee of the deceased hereby declare that I am nominated to receive the benefits under the Canara Bank Employees' Union Golden Jubilee Family welfare Scheme Sri. / Smt. _____

I request you to credit the amount to my SB / OD / AC No. _____ with the branch (DP Code _____) of Canara Bank in full settlement of the claim for the benefits from the scheme.

(ATTACH COPY OF THE AADHAR OR PAN CARD OF THE NOMINEE)

Date : _____ Signature : _____

Signature of Witness : _____

Name with Staff No. : _____

State Committee Member / Branch Secretary - Canara Bank Employees' Union

Branch : _____

Counter Signed by : _____

State Secretary : _____

RECEIPT

Received from the Canara Bank Employees' Union Golden Jubilee Family Welfare Scheme the sum of Rs..... (Rupees)
in full settlement of my claim as nominee of Sri. / Smt. _____ and the scheme is discharged from all liability and obligation to me or any person claiming for or through me.

Date : _____



Signature

Signature of Witness : _____

Name with Staff No. : _____

State Committee Member / Branch Secretary : _____

Branch : _____

Date : _____

To be filled up without fail