



Please Paste Your Recent Photograph

**I Card Form**

Name of the Employee : Abhishek Kailash patel...…………………………

Empl. Code No. (For old emp. Only) : ………………………………………………………

Contact No : 9137541325…………………………………………

Designation :  "Sr. Officer - Logistic & Documentation"..………

Head Quarter / Placed At : Mumbai (Maharashtra)……………………………

Branch Address (if any) : ………………………………………………………..

Date of Birth : 8th December 1992……………………………….…

Blood Group : O positive blood …………………………………..

Father’s Name : Kailash Patel………………………………………..

Emergency Contact Person’s name : 8082147878 / Amit patel.………………………….

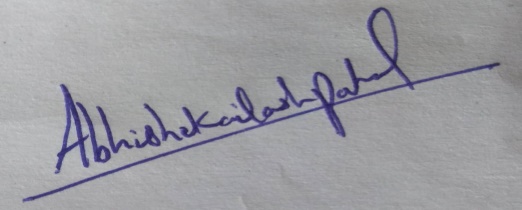
Emergency Contact Person’s ph. no. : 9967521613 / Amravati patel.…………………….

Employee Mailing Address : abhishekpatel1238@gamil.com....……………….

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Name of Spouse (wife / Husband) : …………………………………………………….

Date:- 13-08-2020

Signature:- ****