THE PAYMENT OF WAGES ACT 1936 FORM-I

NOMINATION AND DECLARATION FORM

(See rule 3)

1. Name of person making nomination	5.	Marital Status :	
(In block letters) ASRAR FAROOR BHAT		Dunavania	
2. Father's/Husband's name:	6.	Permanent Address:	
FAROOR ASHMAD BHA		Mirher Sherri Baramulle Jamma & Kashuir 193101	
3. Date of Birth:	Temporary Address:		
28/03/1999		Lanon free fremier, Hitel city Hyderaled	
4. Sex: Male			

I hereby nominate the person(s)/ cancel the nomination made by me previously and nominate the person(s) mentioned below to receive any amount due to me from the employer, in the event to my death.

Name of the nominee/nominees	Address	Nominee's Relationship with the member	Date of Birth	Total amount of Share of accumulations in credit to each nominee	If the nominee is minor, name, relationship and address of the guardian who may receive the amount during the minority of nominee.
(1)	(2)	(3)	(4)	(5)	(6)
FAROOQ AHMAD BHAT	Misher Sheeri Baramble Jamus & Kaghun's Kaghun's	Father	10-20 -1970	1000,0	

- 1. Certified that I have no family and should I acquire a family hereafter, the above nomination shall be deemed as cancelled.
 - 2. *Certified that my father/mother is/are dependent upon me.
 - 3. *Strike out whichever is not applicable.

Signature or the thumb Impression
Of the employed person.

CERTIFICATE BY EMPLOYER

> Signature of employer or other authorized Officer of the establishment and Designation

Place: Bougallove Date: 22-08-2022

> Name and Address of the Factory/ Establishment and rubber stamp thereof