



Beneficiary Nomination Form

(Group Term Life Insurance)

Employee Name:	Reshma Ambili	
Employee ID:	716839	
Date of Birth:	17th March 1988	
Beneficiary Details		
Name of the Beneficiary	Relationship with employee	% Share of benefit
Satheesh Kumar R G	Husband	50
Prayag S R	Son	50
Employee Signature:	<i>Reshma Ambili</i>	
Date:	15th June 2021	
Place:	Neyyattinkara	



Beneficiary Nomination Form

(Personal Accident)

Employee Name:	Reshma Ambili	
Employee ID:	716839	
Date of Birth:	17th March 1988	
Beneficiary Details		
Name of the Beneficiary	Relationship with employee	% Share of benefit
Satheesh Kumar R G	Husband	50
Prayag S R	Son	50
Employee Signature:	<i>Reshma Ambili</i>	
Date:	15th June 2021	
Place:	Neyyattinkara	