

बिला वियम OC (19)

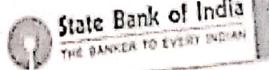
कुनवारी ला

1055

	अफुमेस्ससी अंटेस्टेट करनानसरी है + जोधी
(1)	पास बुक मे ब्लेन्स चेक करना है।
(2)	पास बुक मे 500 के ब्लेन्स एवं के पार्ट से पास बुक लेना है।
(3)	अगर पास बुक मे पैसे कम है तो आपकी वाले डाक्टर
(4)	विमा करने पहले पास बुक ब्लेन्स चेक करके फार्मिंग करता है।
1	नाम - घोपलाल माधवी प्रेमलाल लोपचे सही
2	वय - 35
3	मकाउन्ट पासबुक
4	किं का नाम एटेंट बैंक
5	वारसदार
6	नामा
7	कोरे पेज
8	मोबाइल नम्बर 8309398721 - 9834277889
9	50 वय के मन्दर
10	कागजात माधार + राशनकार्ड + हेल्परन + जोड़ि
11	OC बिला फार्म
12	समस्या - 1 बिला नहीं हुआ है। विभाड़ आए।
13	समस्या - 2
14	समस्या - 3

PRADHAN MANTRI JEEVAN JYOTI BIMA YOJANA

SBI Life
INSURANCE
With Us, You're Sure



CONSENT-CUM-DECLARATION FORM

(To be filled in by members joining the scheme during the permitted 'Enrollment Period')

For Office Use

Agent'/BC's Name*	Agency/BC Code No.*
Bank A/c details of Agent/BC - *	
Signature of Agent/Banking Correspondent*	

I hereby authorize you to debit my Savings Bank Account with your Branch with Rs.330/- (Rupees Three Hundred Thirty Only) plus Service Tax if applicable towards premium of life cover under PMJJBY. I further authorize you to deduct in future after 25th May and not later than on 1st of June every year until further instructions, an amount of Rs.330/- (Rupees three hundred thirty only) and Service Tax if applicable, or any amount as decided from time to time, which may be intimated immediately if and when revised, towards renewal of coverage under the scheme.

I have not authorized any other bank to debit premium in respect of this scheme. I am aware that my life cover shall be restricted to Rs.2,00,000/- only in the event of my death.

I have read and understood the Scheme rules and I hereby give my consent to become a member of the Scheme.

I authorize the Bank to convey my personal details, given below, as required, regarding my admission into the group insurance scheme to SBI Life Insurance Company Limited.

Applicant Details, as per Bank / KYC records :

Name of the Account holder (as per Bank records)	प्रीमियल फ्लाइट बोय्स	
Savings Bank Account No.	Aadhar Number, if available	
E-mail Id	Mobile No.	
Name, address and relationship (if any) of nominee	Name and address of Guardian (if nominee is minor)	
Date of Birth	Address	

I hereby nominate my nominee as above under this scheme.

Nominee being minor, his / her guardian is appointed as above.

I hereby declare that the above statements are true in all respects and that I agree and declare that the above information shall form the basis of admission to the above scheme and that if any information be found untrue, my membership to the scheme shall be treated as cancelled.

Date: _____

Signature
Address:

Signature verified

(Branch Official) (Rubber Stamp with bank branch name and code)

ACKNOWLEDGEMENT SLIP CUM CERTIFICATE OF INSURANCE

We hereby acknowledge receipt of "Consent-cum-Declaration Form" from Shri / Smt. holding Saving Bank Account No..... Aadhar No..... consenting and authorizing auto-debit from the specified Savings Account to join the Pradhan Mantri Jeevan Jyoti Bima Yojana with SBI Life Insurance Company Limited for cover under Master Policy No 76001000135 subject to correctness of information provided regarding eligibility and receipt of consideration amount.

330 (₹330/-)

Seal & Signature of Authorised Bank Official

22-9-19

OK

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भारत निवडणक आयोग
Election Commission of India

ओळखपत्र
IDENTITY CARD

LSH1251727



मतदाराचे नाव : चोपलाल प्रेमलाल बोपचे
Elector's Name : Chopalal Premalal Bopache

वडीलांचे नाव : प्रेमलाल बोपचे
Father's Name : Premalal Bopache

लिंग : M Sex : M

1/1/2006 रोजी वय : 22
Age as on 1/1/2006 :

पत्ता : 366, ससाकरणयेळा,
चिरचाळबांध
गाव : चिरचाळबांध
तालुका : आमगाव
जिल्हा : गोंदीवा- 441614

Address : 366, Sasakaranayela,
Chirchalbandi
Village : Chircharalbandh
Taluka : Amagaon
District : Gondiya- 441614

LSH1251727

मतदार नोंदणी अधिकारी
147-गोरेगाव विधानसभा मतदारसंघ करिता
Electoral Registration Officer
For 147-Goregaon Assembly Constituency

स्थळ : आमगाव
Place : Amagaon

दिनांक/Date : 17/1/2007

३ प्र भृत्याच्या विविष योनांसाठी ओळखपत्र स्फूर्त उत्योगात आणतो येईल.
This card may be used as an Identity Card under
different Government Schemes 55/1045

३७५९, २५८

जुनी पुरवडा ; इंदानंदेश्वर मुख्यक्रम
सालताराव / अ. डि. एस. कोटे ०४ संदर्भ कनारे

No. 806292
SU

अ. कोटे

३७५९३

कोटे क्रमांक

पुरवलयक्रिकर / शिगर्हिक्रिकर सम्पर्क असलेली नाव

संदर्भ कनारे

०४

मुख्यक्रम
क्र० ३७५९३

पुरवलय
पुरवलयक्रिकर

सम्पर्क
सम्पर्क

पुरवलय
पुरवलयक्रिकर

सम्पर्क
सम्पर्क

३२ रात्रि. शिगर्हिक्रिकर

सम्पर्क
सम्पर्क

अगोत नमूद
पुरवलय
पुरवलयक्रिकर

R. २७२०२७५१०९८

अ. नासी पुरवलय व प्राहक सरक्षण दिनांक
महाराष्ट्राचे राज्यपाल याच्या आदेशानुसार
व नावाने

संचित

शुल्क.—मूळ पविकोस ५ रुपये, इच्छम पविकोस १० रुपये
संदर्भ कनारे

संदर्भ कनारे

विकीरणोपचार व कर्करोगशास्त्र विभाग
शासकीय वैद्यकीय महाविद्यालय व रुग्णालय नागपुर
DEPT OF RADIATION THERAPY & ONCOLOGY
GOVERNMENT MEDICAL COLEGE & HOSPITAL
NAGPUR

No GMCHN/RT/ AJ-959/ 2018

Date: 22/10/2018

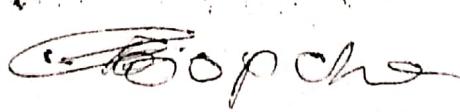
TO WHOMSO EVER IT MAY CONCERN

This is to certify that patient named **Chopla Premlal Bopche** Age about 35 year, Male Our Case No **AJ-959** is a diagnosed case of **Ependymoma.(Brain Tumor)with postoperated (Cancer)**

The Patient is undergoing treatment and regular follow up at the Department of Radiation Therapy and Oncology, Govt. Medical College and Hospital Nagpur from 23/05/2018.


Associate Professor & Head
Dept.of Radiation Therapy and Oncology
Govt. Medical College and Hospital,
Nagpur.

Associate Professor & Head
Dept. of Radiation Therapy &
Oncology, Govt. Medical College
& Hospital, Nagpur.



APPENDIX - 2

Leaving Certificate

688

(See Rule 17 and 32 in Chapter II Section II)

(No changes in entry in this certificate shall be made except by the authority issuing it and any infringement of the certificate is liable to involve the imposition of penalty such as that of rustication) school recognized permanently up to

Name of the School : Hariharbhai Patel Jr. College

Tah. Amravati Distt. Garegaon

(Recognized by the Govt. of Maharashtra State up to

Admission Register No. 1479 Serial No. 88/15

1. Name of the Pupil in full Choplak premal Bopche

2. Race and Caste (with Sub-Caste) Powar

3. Nationality : INDIAN 4. Place of Birth

5. Date of Birth, Month and year according to the Christian Era (Both in Words & Figures)

13.12.1983 Thirteenth Dec. N.H. Eighty three

6. Last School Attended H. B. P. High School Chinchalgundh

7. Date of Admission 22.3.2002 8. Progress satisfactory 9. Conduct Good

10. Date of Leaving the School 22.5.2002

11. Standard in which studying XIIth Since When 2001-2002

12. Reason of Leaving the School End of Session

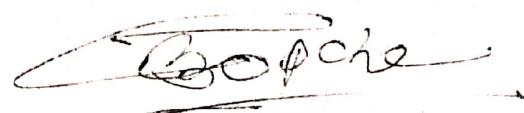
13. Remarks : (i) She has Passed in S.S.C./H.S.C. Exam
Year Feb. 2002(iii) Particulars regarding Educational Concession (if any) reimbursement of fees etc.
certified that the above information is correct in accordance with the School register.

Dated 22.3.2002

Clerk

Principal
Hariharbhai Patel Jr. College
Head Master

N.B. 1) Entries regarding the date of birth according to the Christian Era and the New National Calendar and the standard in which studying in column 5 and II of the Leaving Certificates should be made both in figures and in words. 2) These entries shall be in manuscript and not typewritten. 3) Accelerated promotion earned by the pupil during his/her School career should be specified in the Remarks column indicating the standard year and the school in which accelerated promotion was given.





भारत सरकार
Government of India



चोपलाल प्रेमलाल बोपचे
Choplal Premalal Bopche
जन्म तिथि / DOB : 13/12/1983
पुरुष / Male



8248 8580 8418

आधार - आम आदमी का अधिकार



भारतीय विशिष्ट पहचान प्राधिकरण
Unique Identification Authority of India

पक्षा S/O फ्रेमलाल बोपचे, मु
कुन्डलोला पो. चिरचाळबाई
ना. प्रग्गतीवाद, चिरचाळबाई,
चिरचाळबाई, गोटिया, महाराष्ट्र
441614

Address: S/O Premalal Bopche, mu
kunbilola, po chirchalbandh tal amgaon,
Chinchalbandh, Chinchal Bandh, Gondiya,
Maharashtra, 441614

8248 8580 8418

1947
1800 300 1947

✉
help@uidai.gov.in

WWW:
www.uidai.gov.in

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1055

भारत सरकार
Government of India

चोपलाल प्रेमलाल बोपचे
Chopla Premal Bopche
जन्म तिथि / DOB : 13/12/1983
पुरुष / Male



8248 8580 8418

आधार - आम आदमी का अधिकार



आधार

भारतीय विशिष्ट पहचान प्राप्तिकरण

Unique Identification Authority of India

पता: S/O: प्रेमलाल बोपचे, मु.
कुनबीटोला, पो. चिरचाळबांध
ता. आमगाव, चिरचाळबांध,
चिरचाळबांध, गोदिया, महाराष्ट्र,
441614

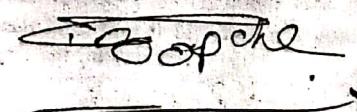
Address: S/O: Premal Bopche, mu.
kunbitola, po.chirchalbandh tal.amaon,
Chirchalbandh, Chirchal Bandh, Gondiya,
Maharashtra, 441614

8248 8580 8418

1947
1800 500 1947

help@uidai.gov.in

www.uidai.gov.in



**SBI - KIOSK BANKING
Identity Card**

Cif Number: 90403971497
Account Number: 38747120715
IFSC Code: SBIN0005427
First Name: CHOPLAI
Middle Name: PREMLAL
Last Name: BOPCHE
Address: KUNBITOLA
CHIRCHAL BANDH
DIST. JUNDIYA

Village Name: AMGAON
PinCode: 441614
KO Name: RAJU BAHNDARKAR
KO Location: KAWARABANDH

