## Not Applicable affirmer For me ANNEXTURE A

I Manoj N	1 itharam	) Pawar	a member of the
	1		Scheme/Fund hereby
request the Tru	stees of		
Scheme / Fund	to transfer in	accordance with	the rule No
Of the Rules of	of the said s	cheme / Fund the	e value of the benefits
secured under	the Assura	nce / Annuities	by the contributions paid
by M/S			on my behalf upto
the date of my	leaving the sa	id	on my behalf upto
(COMDANY) ON			Thate of leaving services to the
Trustees of			Scheme/Fund
of M/S	, A		of which I have became a
member having	joined their	service.	
rights secured Trustees of Policy No	by the contri the Life I	bution amounting	
Dated at	this	day of	
			REVENUE STAMP Signature in full.
Witness:			
Signature:			
Designation:			
Name in Full:			
Address:			