

SCHEDULE
FORM OF NOMINATION
[See ruleXXX-7(3)]

I, (Name).....hereby nominate the person(s) mentioned below to receive the amount that may stand to my credit in the Fund in the event of my death before that amount has become payable or having become payable, has not been paid.

Name and full address of nominee(s)	Relationship with the subscriber	Age	Share payable to each	Contingencies on the happening of which the nomination shall become invalid	Name, address, relationship and age of the person to whom the right of the nominee shall pass in the event of his predeceasing the subscriber	Name and address of the person to whom share is to be paid on behalf of the minor
1	2	3	4	5	6	7

Dated thisday of20

Two witness to signature:

1.

2.

Signature

Name:

Account No.

Countersignature of Educational Office