

Form - I

Nomination and Declaration Form

Part A - Employee Details

VAIBHAV GUPTA Name of Employee (in block letters): 175361 **Employee Number:** 06/10/1999 Date of Birth: Male Gender: **UNAMRRIED** Marital Status: Laxmi Narayan Gupta Father's /Spouse's name: H. No. 14, Tilak Marg, ward no.13, Rajpur, Dist. Barwani. Address (Permanent): Madhya pradesh (451447) H. No. 14, Tilak Marg, ward no.13, Rajpur, Dist. Barwani. Address (Temporary): Madhya pradesh (451447)

I hereby nominate the person(s) /cancel the nomination made by me previously and nominate the person(s) mentioned below to receive the amount in respect of claims pertaining to myself under any of the applicable Insurance Policy of the Employer and any other amount due to me from the Employer, in the event of my death.

Part B - Nominee Details

Name of the Nominee (s)	Address	Nominee's relationship with the employee/ member	Date of Birth of the Nominee	Total amount of share of accumulations in credit to be paid 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)
Laxmi Narayan Gupta	H.No. 14 , Tilak Marg ,rajpur (4514 <m.p.></m.p.>	Father 47)	8/6/1966	100%	NA

Internal

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(Strike out whichever is not applicable.)

- 1. Certified that I have no family and should I acquire a family hereafter; the above nomination shall be
- 2. Certified that my father/mother is /are dependent upon me.
- 3. The above nomination(s) hold true unless revised by me.

Place: Rajpur , M.P.

Date: 8/10/2022

Signature of the Employee

CERTIFICATE BY EMPLOYER

Certified that the above declaration and nomir	nation has been signed before me by
Mr. /Ms	employed in my establishment after he/she
has read the entry/entries have been read ove	r to him/her by me and got confirmed by him/her.
	Signature of the Employer or other authorized officer
	Of the establishment and Designation
	Of the establishment and Designation
Place:	
Date:	

Name and Address of the Factory/

Establishment and rubber stamp thereof

Internal