

Maharashtra State Electricity Board Contributory Provident Fund TRUST MUMBAI.  
 FORM No.1 - (See C.P.F. Regulation No. 8), FORM OF NOMINATION (For use by all subscribers who have family)

I, \_\_\_\_\_ Dsgn. \_\_\_\_\_ C. P. F. A/c. No. \_\_\_\_\_ hereby nominate the persons mentioned below, who are members of my family as defined in regulation of the Maharashtra State Electricity Board, Contributory Provident Fund Regulations to receive the amounts that may stand to my credit in the fund, in event of my death before that amount has become payable, or having become payable has not been paid, and direct that the said amount shall be distributed among the said persons in the manner shown below against their names.

Full Name & Address	Relationship with subscriber	Age of the Nominee	Amount of share of Nominee accumulations to be paid to each if the nominee are more than one *	Contingencies on the happening of which the nomination shall become invalid	Full name, address and relationship of the person, if any, to whom the right of the nominee shall pass in the event of his predeceasing the subscriber. **
1	2	3	4	5	6

- \* Note
- 1) If the persons nominated are more than one this column should be filled in so as to cover the whole amount that may stand to the credit of subscriber in the fund at any time.
  - 2) If the nominee is a minor and his guardian is a person other than the subscriber the full name and address of the guardian should be stated.

Dated this \_\_\_\_\_ day of \_\_\_\_\_ 20\_\_\_\_, at \_\_\_\_\_ (place)

Two witnesses to Signature with detailed address

	Name of witnesses	Signature	Address
1)	_____	_____	_____
2)	_____	_____	_____

Signature of Subscriber  
 Nomination Registration No.

Examined & Admitted

ACCOUNTS OFFICER(PF)  
 MSEB CPF TRUST, MUMBAI