FORM NO. 40A

[See rule 67A/rule 101A]*

Form of nomination

		Provident Fund/		Gratuity Fund*	
[na	me of fund]		[name of fund]		
1.	Name of employee		Surn	ame	
		[in block	k letters]		
2.	Sex				
3.	Religion				
4.	Father's name				
5.	Husband's name				
		[for married	woman only]		
6.	Marital status				
		[whether unmarried, man	rried, widow or wid	ower]	
<i>7</i> .	Date of birth: Day.	Montl	h	Year	
8.	Permanent address:				
	Village	Thana;	Taluk	/Sub-Division	
	Post Office		. District		State
••••					
I	hereby nomina	ate the person(s)	mentioned l	pelow to receive	the
*an	nount that may stand to my *amoiunt of	in the	e event of my death	before that amount becomes	s pay-
abl		2	and direct that the	said amount shall be distri	buted
) in the manner shown agai			
	ame and address of ominee or nominees	Nominee's relationship with the employee	Age of nominee	*Amount or share of accumulations in the provident fund/*amount or share of gratuity to be paid to each nominees	
	1	2	3	4	

be deemed as cancelled.		
2. Certified that my fath	her/mother/sister(s)/minor brot	her(s) is/are dependent upon me.
Dated this	day of	at
		Signature of employee
wo witnesses to signatu	ire	
	declaration has been signed by *he / she has read the entries	Shri/Shrimati
refore me after *the entrication*	es have been read over to him / her by	me
Date		
- w.c		Signature of the trustee or any
		person authorised by the
		trustees in this behalf

*1. Certif ied that I have no family and should I acquire a family hereafter, the above nomination should

^{*}Delete the inapplicable words.

^{\$} This column should be filled in so as to cover the whole of the amount that may stand to the credit of the employee in the provident fund or the whole of the amount of gratuity that may be payable in the event of his death.