LIFE MEMBERSHIP TRANSFER OR CHANGE OF ADDRESS

(Proforma to be sent to State HQ along with the request)

1.	Name of member (in block capitals)	:		
2.	Life membership No.	:		
3.	Name of present Branch	:		
4.	Branch to which transfer is required	:		
5.	Old postal address	:		
6.	New Postal address	:		
			Pin:	Phone
7.	Details of Banch share transfer	:	Amount	DD No
		:	Date	Name of Bank:
8.	Whether member of		Scheme	Membership No.
0.	Whether member of	٠		Membership No.
			PPS	
			sss	
-			Any other	
Ce	rtified that no dues are outstanding ag	ains	st this member to	o this branch
	The state of the s	,		, and branch.
				Signature of Branch Secretary
Da	ite : (Seal)			Name :
No	ote:			
1.	All requests should be forwarded thro	ough	the Branch with	a covering letter of the Branch Secretary

- 2. Direct request from the member will not be entertained.
- 3. For change of address item No. 4, 7 and 8 not required, also send back the old wrapper.
- 4. Request for Inter State Transfer should be forwarded through the respective State Branches. In these cases Branch share to be sent; only after direction from State Office.
- 5. In all cases Enclose a copy of request for transfer received from the member.