

Form VI
[(see rule 28(7))]
NOMINATION FORM

I Nomination the following persons as rightful dependants, to receive all the dues from the Fund on my behalf and in the event of my death, as rightful heirs to receive heirs of receive all benefits due to me.

Name and address of Nominee/Nominees	Relationship with member	Age of Nominee	Amount to be given to each Nominee.

Place:

Date:

Name, Address Registration No.
and Address of the Workers.