Form D

	G	-	see ruie 12(3)] <u>ancellation or</u> variation of no	mination
		by the holder(s) and sub-		the Post Master/Bank Officer of the
To, The Post N	Master/Branch Ma	nager,		
,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,				
L	/We			the holder(s) of
		n your office under	omination previouosly made by	•
No				
ri	ny/our death, beco ther persons.	me entitled to the savings		m due thereof to the exclusion of all
SI, No.	Name of t	he nominee(s)	Full address	Date of birth of nominee in case of minor
L				
*To be filled in case of variation only				
2. As the nominee(s) at the serial number(s)				
(name and full address) as the person to receive the sum due thereon in the event of my/our death				
during the minority of the nominee(s).				
3. The Certificates detailed below are enclosed.				
	Certificates	Denomination	Date of issue	Office of issue
Address				Yours faithfully,
.,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,				
Signature or thumb impression (if illiterate) of holder(s)				
Witnesse			4.44	
1. Name				
Note: In the case of illiterate holders, the witnesses shall be persons whose signatures are known to the Post				
Office/Bank.				
Order of the Post Master/Bank Officer accepting the nomination.				
Date stamp of Post Office/ Signature of Post Master/Bankwijicev.taxguru.in				
Bank Seal				