FORM-XXVIII.

[See rule 266 (7)]

Nomination Form

I nominate the following person/ persons as rightful dependents, to receive all the dues from the fund on my behalf and in the event of my death, as rightful heirs to receive all benefits due to me.

Name ar	nd address	Relationship	with	Age of nominee	Amount to be given
of	Nominee/	member			to each nominee
Nominees	S				

Place

Date

Name Address Registration No & Address of the worker.