

FORM F

[See sub-paragraph (3) of paragraph 12]

STATE BANK OF

**Cancellation or variation of nomination previously made in respect of Account No.
Under the Public Provident Fund Scheme, 1968**

Date

To
The State Bank
of

I, _____, the subscriber in Public Provident Fund Account No. _____, hereby cancel the nomination dated _____ made by me in respect of the aforesaid Public Provident Fund Account

* In place of the cancelled nomination, I hereby nominate the person(s) mentioned below who, shall on my death, become entitled to the payment of the sum due in the above account to the exclusion of all other persons :-

Sl.No.	Name of the nominee	Full address	Date of birth of the nominee in case of minor	Proportionate amount for each nominee

*To be filled in case of variation only.

@ As the nominee(s) at Serial No.(s) _____ is/ are minor(s), I appoint Shri/ Shrimati/ Kumari [name and full address] as the person to receive the sum due in the above account in the event of my death during the minority of the nominee(s).

@ Delete if not applicable

Signature/ thumb impression of subscriber

Subscriber's address:

- (1) Witness:
Name:
Address:
- (2) Witness:
Name:
Address:

FOR THE USE OF ACCOUNTS OFFICE

The above cancellation/ variation of the nomination has been registered in the ledger and entered in the pass book.

Date

Signature of the Accounts Officer