

Nomination Form for the Election 2021 of UGB Family Welfare Society

Name of the **POST** constested

Name of the candidate

Father's/Husband's name

Employee Code (EC no)

UGBFWS I Card No

Date of birth

Name of the branch/Office

Code of the branch/office

Region (I/II/III/IV)

Telephone no

Residence address

Mobile no

Email ID

Date of deposit of nomination fee

Amount of nomination fee deposited

Proposer

S.No	Name	UGBFWS - I Card no	Mobile No	Signature (in full)
1				
2				

Candidate's Declaration

I declare that I am willing to contest for the election of the above post, that the best of my knowledge & belief I have not incurred any disqualification for membership of UGB Family Welfare Society and that I am eligible to contest the elections as per the rules & bye laws of the Society. I further certify that I have paid the Society's subscription in full to date as also other contributions as demanded by the Society from time to time.

Date :

Signature of the candidate:

Endorsement of the Chief Election Officer/Representative of CEO

This nomination form was presented to me in person by/ received by registered post on at Hrs

Place :

Signature of the CEO/Representative of
CEO

Date :