## THE RUBBER BOARD EMPLOYEES' CO- OPERATIVE SOCIETY LTD. No. K. 155

## APPLICATION FOR THE MEMBERSHIP IN RECURRING DEPOSIT SCHEME

1.	Name of the Applicant	<b>:</b>				M. No.	M. No.	
	(Block Letters)		•					
2.	Date of birth / retirement	:		•				
3.	Designation and Scale of Pay	:		•				
4.	Official Address	:			•••••		•••••	
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		******************				••••••••••		
5.	Monthly Subscription	50	100	150	200	250	Months	
	and period	300	350	400	450	500		
6.	Name and address of the nomine relationship (Block letters)	:		*************	• • • • • • • • • • • • • • • • • • • •			
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		DE	CLARA	TION	• •	ν		
	I do hereby agree to abide by the  Also I do hereby authorise the Se	er.			•		s the above Schem	
a t	he rate of Rs							
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Pla	ace:			Signa	ature	•••••		
Da	te:			Name	9	***************************************	<u> </u>	
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The President Rubber Board Employees' Co-operative Society Ltd. No. K. 155, Kottayam - 1.

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