

The Secretary,
S B H Employees' Co-operative
Credit Society Ltd.
Gunfoundry : HYDERABAD - 500 177



Branch : _____
Date : _____

A M No: _____ Br Code: _____

LIFE CERTIFICATE

I, do hereby certify that Shri./Smt. _____ S/o, W/o Shri.
_____ Index No. _____, who is an Associate member of S B H Employees' Co-
operative Credit Society Ltd., availing Superannuation Benefit, is alive on this day _____
Residing at _____
(Door No) (Area / Locality)

(Street No./Name)

(Town / PIN)

His/her Pension payable account No is SB / OSB No. _____.

(Signature of the Associate member)
ATTESTED

Branch Manager
(Office Seal)

TO BE SUBMITTED ON OR BEFORE 30th NOVEMBER every year