

FORM 3

DEPARTMENT OF POSTS
[See Rule 14(4)]

Serial No.....

**FORM OF APPLICATION FOR CANCELLATION OR VARIATION OF
NOMINATION PREVIOUSLY MADE IN RESPECT OF SAVINGS CERTIFICATES UNDER SECTION 6 OF
THE GOVERNMENT SAVINGS CERTIFICATES ACT 1959**

(This form will be filled in by the holder(s) and submitted with the certificates to the Postmaster of the office where the certificates stand registered)

To
The Postmaster
.....

Space for Postage Stamp

Under provisions of Section 6(1) of the Government Savings Certificates Act, 1959, I/We the holder(s) of savings certificates detailed below hereby cancel the nomination previously made by me/us in respect of these certificates and registered in your office under No. dated

* In place of the cancelled nomination, I/We hereby nominate the person/s mentioned below, who shall, on my/our death, become entitled to the savings certificates and be paid the sum due thereon to the exclusion of all other persons.

SI	Name of the nominee(s)	Full Address	Date of birth of nominee in case of minor

* To be filled in case of variation only.

2 As the nominee(s) at the serial number (s) above is/are minor(s). I/We appoint Shri/Smt/Kumari (name and full address) as the person to receive the sum due thereon in the event of my/our death during the minority of the nominee(s).

3 The certificates detailed below are enclosed :-

Serial No.of certificates	Denomination	Date of issue	Office of issue

Address
.....
.....
.....

Yours faithfully

Signature (or thumb impression, if Illiterate) of holder(s)

(in case of illiterate holder, father's name should be given)

Witnesses

Name

Address (1)

Name

Address (2)

NB : In the case of illiterate holders, the witnesses shall be persons whose signature are known to the Post Office.

Order of the Postmaster accepting the nomination

Date Stamp of
Post Office

Signature of Head/Sub Postmaster