Application for Acceptance of Fixed Deposit

То	The Secretary, The Palakkad Dist. Police Dep No. P 1021, Palakkad.	ot. E	Employees Co-op. Society Ltd.,
Sir,			
			it Rs
	ipees		all abide by the bylaws and subsidia
	es of the society as are in force now		
	declare that the following statement	ent is	is true.
1.	Name (General No. if the applicant is a member,		
2.	Phone No.	-	
3.	Member No.	-	
4.	Father's Name	-	
5.	Age	-	
6.	Occupation	-	
7.	Address	-	
8.	Person to whom the Deposit Should be returned in the event of the depositor's death	a) b) c)	Father's Name
9.	Rate of interest payable	-	
			Specimen Signature 1.
			2.
			3.
Date			Signature