FORM FOR WITHDRAWALOF NOMINATION [See the paragraph 3(a) of the schedule]

Τo,

Returning Officer (Election year – 2019), SBI Supervising Staff Co-operative Credit Society Ltd, J.C. Road, Patna

- 1. Name of the multi-state Co-operative society and address
- Name of the candidate in case of an individual member of multi-state cooperative society which he is representing

SBI Supervising Staff Co-Operative Credit Society Ltd.,Patna

- 3. Membership No.
- 4. Father's / Husband Name (in case of individual member)
- 6. Mobile No. (with whatsapp facility)
- 7. Email Address
- 8. Date of submission of nomination form.

CANDIDATES'S DECLARATION

I declare that I am willing to withdraw my nomination for election and that, to the best of my knowledge and belief I have not incurred any disqualification for membership of the board of State Bank of India Supervising Staff Co-operative Credit Society Ltd., Patna., multi- State co-operative society in terms of the Act, the rules and the bye-laws of the multi- State co-operative society

(Orginatare of the bahadate)
Endorsement by the Returning Officer
This withdrawal paper was presented to me in person by
by through Sri/Smtathrs.

Place:
Date:

Signature of Returning Officer or person authorized by him

(Signature of the candidate)