

AOUCB BENEFIT FUND
(Register under Indian Trust Act.)
10, B. T. M. Sarani, Kolkata - 700 001

Sl. No. BF/

APPLICATION FOR LOAN

Date :

For Official Purpose

The Secretary

AOUCB BENEFIT FUND
10, B.T.M. Sarani
Calcutta - 700 001

Account position as on	
Bnefit Fund Membership no.	
Total deposit Under Unit Rs.	
Balance of existing if any Rs.	

I am a member of AOUCB and has been admitted as a member of AOUCB Benefit Fund.

I intend to become a life member of AIUCBOF Members Welfare Benevolent Trust, as per Application enclosed.

I beg to apply for loan of Rs. 3010/- / Rs.1000/-(Rupees three thousand ten / Rupees one thousand only) towards payment of my one time contribution to AIUCBOF Members Welfare Benevolent Trust as per rules of the Fund. The repayment/ realisation of this loan amount with interest shall exclusively be determined by the Trustees of Fund who are authorised to recover the same from my salary and other receivables from the bank.

I understand that the above loan will be treated as additional one in case I have existing loan and/or intend to take further loan as per normal loan scheme of the Fund.

I further agree to pay / reimburse. The Benefit Fund all interest, expenses and cost for realisation of the loan.

I further authorise The Fund to remit my contribution of Rs. 3010/= direct to AIUCBOF Members Welfare Benevolent Trust from the loan amount sanctioned / to be sanctioned by you .

The following are my required Particulars.

NAME	
P.F. NO.	
BENEFIT FUND MEM. NO.	
POSTING BR.& DESIG.	
AGE	
DATE OF SUPPER ANNUATION	

Yours faithfully,

(Signature of the applicant)

Recommended for sanction

for AOUCB
Regional Secretary / Office Bearer