

**STATE BANK OF INDIA OFFICERS' ASSOCIATION**  
**BHOPAL CIRCLE, BHOPAL**  
(Regd. Under Indian Trade Unions Act, 1926, Regn. No.195/BPL/73)

The General Secretary,  
State Bank of India Officers' Association,  
BHOPAL (M.P.)

Dear Sir,

I am an Officer of the State Bank of India .....Branch/  
Deptt..... I have read  
the Constitution and Bye-laws of the Association and agree to abide by the same.

I remit herewith a sum of Rs....., being the Admission fee. I am also authorising the Bank to  
deduct from my salary and allowances and remit to you the monthly subscription. Please enroll me  
as an Ordinary member of the Association. In this connection, I assure that I shall not act in any  
manner that will be detrimental to the Association or harm the prestige of the Association.

Yours faithfully,

Place :

Date :

(Signature of the Officer)

Full name (in Block letters)

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Father's/Husband's Name.....

P.F.No..... Designation: OJM/TO/PO Batch .....Mobile

No.....

Date of Birth.....

Branch/Deptt.....

Residential Address

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Admitted at the meeting of the Executive Committee held on ..... and enrolled as an Ordinary  
Member, with effect from..... Admitted in the Register of Members, enrolled and Fee  
credited.

GENERAL SECRETARY      CIRECLE PRESIDENTSECRETARY (FINANCE)

Admission Fee Rs.200/-, Monthly Subscription Rs.140/-, Welfare Fund Rs.30/- and Death Relief  
Fund Rs.30/-

Total Rs.200/- p.m.

ANNEXURE - II

Place:

Date :

The Branch Manager/Office Manager,  
State Bank of India,

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Dear Sir,

**AUTHORISATION FOR DEDUCTION OF ASSOCIATION SUBSCRIPTION FROM THE  
MONTHLY SALARY AND ALLOWANCES :**

Please arrange to deduct every month from my salary and allowances a sum of Rs.140/- (Rupees One Hundred Forty only) and remit it to the General Secretary, State Bank of India Officers' Association, Bhopal by a crossed Bank Draft favouring State Bank of India Officers' Association, Subscription A/c, payable at Udayachal Branch, Bhopal. Please also arrange to deduct Rs.30/- (Rupees Third only) per month from my salary and remit the same to the credit of current account of the State Bank of India Officers' Association, Bhopal Circle Members Welfare Fund A/c, Rs.30/- (Rupees Third only) per month towards death relief fund maintained at Udayachal Branch, Bhopal.

2. This authorisation is in suppression of my previous authorisation and shall continue to be effective till I revoke it.

Yours faithfully,

Signature.....

Name (in Block Letters).....

Designation.....

Department/Branch.