AFFIDAVIT

To claim the benefits by nominee when the 'KSPC Certificate is lost'

1. That Sri / Smt	I Sri /	SmtS/o / D/o / W/o
1. That Sri / Smt	aged	years residing at
Certificate No datedissued by the Karnataka State Pharmacy Council Bangalore and Enrolment Certificate No dated issued by the Karnataka Pharmacy Council Registered Pharmacists Welfare Trust Bangalore. 2. That Sri / Smt		do hereby solemnly affirm and state as under:
Certificate No datedissued by the Karnataka State Pharmacy Council Bangalore and Enrolment Certificate No dated issued by the Karnataka Pharmacy Council Registered Pharmacists Welfare Trust Bangalore. 2. That Sri / Smt		
Bangalore and Enrolment Certificate No dated issued by the Karnataka Pharmacy Council Registered Pharmacists Welfare Trust. Bangalore. 2. That Sri / Smt	1.	That Sri / Smt was the Registered Pharmacist with a Registration
Karnataka Pharmacy Council Registered Pharmacists Welfare Trust. Bangalore. 2. That Sri / Smt		Certificate No datedissued by the Karnataka State Pharmacy Council
Bangalore. 2. That Sri / Smt		Bangalore and Enrolment Certificate No dated issued by the
2. That Sri / Smt		Karnataka Pharmacy Council Registered Pharmacists Welfare Trust
name in the said Trust. 3. Now that Sri / Smthas expired (vide Death certificate No		Bangalore.
3. Now that Sri / Smthas expired (vide Death certificate No	2.	That Sri / Smt had named as nominee while enrolling his
dtd) and that the KSPC Certificate issued to Sri / Smt		name in the said Trust.
the Karnataka State Pharmacy Council, Bangalore is found lost and is untraceable. (Vide police complaint / FIR No	3.	Now that Sri / Smthas expired (vide Death certificate No
untraceable. (Vide police complaint / FIR No		dtd) and that the KSPC Certificate issued to Sri / Smtby
Nominee is enclosed) 4. I swear that the information furnished above are true and correct to the best of my knowledge and that I am submitting this affidavit to claim the benefits from the Karnataka Pharmacy Council Registered Pharmacists Welfare Trust Bangalore, as a nominee. Witness Signature Deponent. Name:		the Karnataka State Pharmacy Council, Bangalore is found lost and is
4. I swear that the information furnished above are true and correct to the best of my knowledge and that I am submitting this affidavit to claim the benefits from the Karnataka Pharmacy Council Registered Pharmacists Welfare Trust Bangalore, as a nominee. Witness Signature Deponent. Name:		untraceable. (Vide police complaint / FIR No dated given by
of my knowledge and that I am submitting this affidavit to claim the benefits from the Karnataka Pharmacy Council Registered Pharmacists Welfare Trust Bangalore, as a nominee. Witness Signature Deponent. Name:		Nominee is enclosed)
from the Karnataka Pharmacy Council Registered Pharmacists Welfare Trust Bangalore, as a nominee. Witness Signature Deponent. Name:	4.	I swear that the information furnished above are true and correct to the best
Bangalore, as a nominee. Witness Signature Name:		of my knowledge and that I am submitting this affidavit to claim the benefits
Witness Signature Deponent. Name:		from the Karnataka Pharmacy Council Registered Pharmacists Welfare Trust
Signature Deponent. Name:		Bangalore, as a nominee.
Signature Deponent. Name:		
Name:	Witnes	<u>SS</u>
Name:		
Name:	Sianat	Ture Deponent
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Address:		SS: