

## AFFIDAVIT

To claim the benefits when the 'Enrolment card is lost'

I Sri / Smt .....S/o / D/o / W/o .....  
aged.....years residing at .....  
.....do hereby solemnly affirm and state as under:

1. That my..... (relationship) Sri / Smt..... was the Registered Pharmacist with a Registration Certificate No..... dated..... issued by the Karnataka State Pharmacy council, Bangalore and Enrolment Certificate No. .... dated..... issued by the Karnataka Registered Pharmacists Welfare Trust, Bangalore.
2. That Sri / Smt ..... had named me as nominee while enrolling his name in the said Trust.
3. Now that Sri / Smt .....has expired (vide Death certificate No..... dtd.....) and that the Enrolment Certificate issued to Sri / Smt .....by the Karnataka Registered Pharmacists Welfare Trust, Bangalore to is found lost and is untraceable.
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 Registered Pharmacists Welfare Trust, Bangalore, as a nominee.

Witness

Signature

Deponent.

Name:

Date:

Address: