

SPECIMEN SIGNATURE CARD

ओमप्रकाश देवडा पीपल्स को-ऑपरेटिव्ह बँक लि., हिंगोली
Omprakash Deora People's Co-operative Bank Ltd., Hingoli.

(Multi State Bank)

Account No.

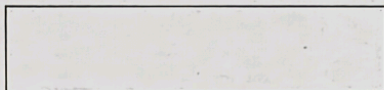
Branch

Name 1

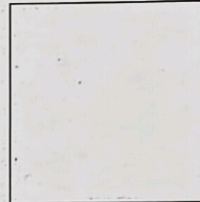
Name 2



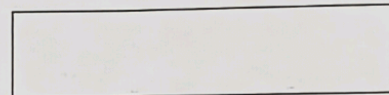
(Photograph)



(Please sign in the box above)



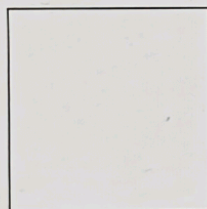
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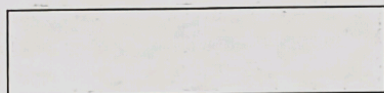
(Please sign in the box above)

Name 3

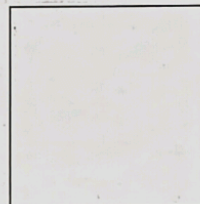
Name 4



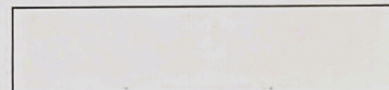
(Photograph)



(Please sign in the box above)



(Photograph)



(Please sign in the box above)

Note : In Case of Limited Companies/Firms/Trusts/Clubs/Associations, etc., signatures should be across the Rubber stamp of the Company/Firm.

Mandate for Account Operation.

<input type="checkbox"/> Single	<input type="checkbox"/> either or survivor	<input type="checkbox"/> Former or survivor
<input type="checkbox"/> Any one or survivor	<input type="checkbox"/> Jointly by all	<input type="checkbox"/> Others(please specify)

For Bank use only :

Signed in the presence of

Signature captured by

Signature verified by

Approved by