BABBOORKAMME SEVA SAMITHI (R)

No 17 Seshadri Road Bangalore 560 009

Email id info@babboorkamme.org 080 2228 1848 9380 301 904

Website URL:-www.babboorkamme.org

TO BE SUBMITTED BY THOSE WHO ARE GETTING FINANCIAL ASSISTANCE BY 31ST MARCH EVERY YEAR

I, _______here by certify that I have seen Sri / Smt ______S/o, D/o, W/o On_____ who is resident of (address) and has approached Babboorkamme Seva Samithi No 17 Seshadri Road Bangalore 560009 for the renewal of the financial assistance for the year_____. Signature / LTM of Beneficiary/ with date Signature of the Certifying member / date Name in Block letter. Name in Block letter & MS No. Contact No: Address: Address:

Note: This certificate is issued only for the purpose of renewal of financial assistance by Babboorkamme Seva Samithi No 17 Seshadri Road Bangalore 560009 (REGNO 246/34-35)

FOR OFFICE USE

a.	Life certificate received on
b.	Financial assistance with effect from

Secretary.