

SBIOA – AHMEDABAD CIRCLE Triennial Election: 2023-26

Circular No.SBIOA/EC/02

Date: 03.11.2023

Please circulate to All Members:

State Bank of India Officers' Association (SBIOA),
Ahmedabad Circle Triennial Election
For The Term 2023-26

We refer our communication by way of Circular No. SBIOA/01 dated 26.10.2023.

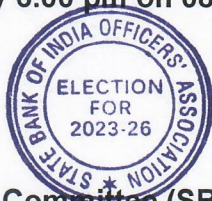
We attach the format of the Nomination Withdrawal Form as per Annexure for the registered nomination(s). The said format is also uploaded on the website www.sbioaahmedabad.org. The withdrawal form should reach to the office of the Chairman, Election Committee at below mentioned address latest by 6.00 pm on 16.11.2023 (Thursday).

Address of the Chairman, Election Committee, SBIOA, Ahmedabad Circle:

Jatin Solanki
Chairman, Election Committee (SBIOA)
C/o. Currency Chest management Cell
5th Floor, Local Head Office
Lal Darwaja
Ahmedabad – 380 001

We reiterate that the last date of filling nomination is 08.11.2023 (Wednesday) and the duly filled in nomination(s) should reach to the Chairman, Election Committee latest by 6.00 pm on 08.11.2023.


(Jatin Solanki)
Chairman, Election Committee (SBIOA)



To,
The Chairman, Election Committee
SBIOA Ahmedabad Circle
Triennial Election – 2023-26
LHO, Ahmedabad.

SBIOA – AHMEDABAD CIRCLE Triennial Election: 2023-26
Nomination Withdrawal Form

NAME OF NOMINEE/CANDIDATE:
(First Name/ Middle Name/ Surname) (in BLOCK letters)
(As appeared in the nomination form)

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POST APPLIED FOR (now withdrawn):

#	Name of post	Post applied for (Post No.)
1		
2		
3		

I _____ hereby agree to withdraw
my above mentioned nomination(s) and these nomination(s) should be treated as cancelled. I
understand that any claim hereafter will not be entertained for these posts. Kindly refund
Nomination Fee paid by me for the above mentioned post(s) in my account no:
_____ (Branch code _____ / IFSC: _____)

(Signature of candidate)
PF. No. _____
(As appearing in the nomination form)
Place:
Date:

Witness:
(Mandatory - Any member of SBIOA, Ahmedabad Circle can witness)

Signature: _____ Date: _____
Name : _____
PF.No : _____
Branch: _____