MUNICIPAL CORPORATION OF HYDERABD URBAN COMMUNITY DEVELOPMENT

APPLICATION FOR REVOLVING FUND FOR

PHOTOGRAPH OF THE GROUP ORGANISERS

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- 1 CIRCLE :
- 2 NAME OF THE THRIFT & :
- **3** LOCALITY / SLUM WITH :
- 4 DATE FROM WHICH :
- 5 NAME OF THE BANK :
- 6 SAVING ACCOUNT NO. :
- 7 DATE ON WHICH

:

:

:

- 8 NO. OF MEMBERS
- 9 COMMUNITY

SC	ST	BC	OC	

				UNCOL			
SL.NO.	NAME OF THE MEMBER & FATHER/HUSBAND	ADDRESS	AGE	OCCU- PATION	CASTE	PER CAPITA INCOME	REMAKS
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DETAILS OF THRIFT & CREDIT GROUP MEMBERS

OFFICE REMARKS

- 1 Certified that above members of THRIFT & CREDIT group are poor and they come under Below Poverty Line.
- 2 Verified the particulars mentioned in the application and found correct.
- 3 Above THRIFT & CREDIT group is existing and operating the transactions and found satisfacterly.

SIGNATURE OF GROUP ORGANISER SDO / SW / CDO / CO, UCD Dy.Project Officer/ Project Officer, UCD Dy.Municipal Commissioner/ Addl.Commissioner MCH