## MEMBER DATA UPDATION FORM



	Share CIF No	:
	Finacle CIF N	o:
From:  Member's Name: Mr/Ms/Mrs		Date of Birth: / /
Joint Applicant : Mr/Ms/Mrs		
To, The Manager, Share Department, Bharat Co-operative Bank (Mumbai) Ltd., Marutagiri, Sonawala Road, Goregaon East, Mumbai 400063.	Photograph of the MEMBER  Please affix latest photo and sign across the photo	Photograph of the JOINT APPLICANT  Please affix latest photo and sign across
Dear Sir/Ma'am,	the photo	the photo
Subject: Updation of Member/s details.		
I/We refer to my/our <b>Membership Number</b>	Please update regis	ter my details as submitted below
1) Email Id		
2) Mobile No:	Alternate Mobile No:	
New Address:		
	State:	Pincode:
4) Instructions for sending Annual Report:		
Send Annual Report to my email id stated about the Annual Report is not required, as already recessions annual Report is available on Bank's website.  Send Physical Annual Report to my/our residents.	eiving it for Membership No is sufficient and hence do not send p	
<ul><li>Annual Report is not required, as already rece</li><li>Annual Report is available on Bank's website</li></ul>	eiving it for Membership No is sufficient and hence do not send p ential Address.	hysical copy.
Annual Report is not required, as already rece Annual Report is available on Bank's website Send Physical Annual Report to my/our reside  5) Details of Bank Account for crediting Dividend:	eiving it for Membership No is sufficient and hence do not send p ential Address. Bran BranBFSC Code	hysical copy. och
Annual Report is not required, as already rece Annual Report is available on Bank's website Send Physical Annual Report to my/our reside  5) Details of Bank Account for crediting Dividend: Name of the Bank	eiving it for Membership No is sufficient and hence do not send p ential AddressBran IFSC Code (Please attach	hysical copy. och
Annual Report is not required, as already rece Annual Report is available on Bank's website Send Physical Annual Report to my/our reside  5) Details of Bank Account for crediting Dividend: Name of the Bank Account Number	eiving it for Membership No is sufficient and hence do not send p ential AddressBran IFSC Code (Please attach	hysical copy.  ach a cancelled cheque/or Xerox copy

Note: Please submit this form at your nearest branch of Bharat Co-operative Bank (Mumbai) Ltd., or email scanned copy to shares@bharatbank.co.in