

From,
Member ID No :
Member details :

To
Officer in charge
CGOM ANNEXE
NOIDA

SUB : REFUND/ TERMINATION OF _____

Respected Sir

It is hereby requested to refund/terminate of CGOM Annexe facilities _____
_____ for _____ on _____.

My Bank Details are as follows.

Name of Bank:

A/C Number :

IFSC Code :

Thanking you,

Yours faithfully

Signature of Member

Date :