



GUJARAT ADVOCATES' WELFARE FUND ACT, 1991

Application Form For **SECOND BLOCK PERIOD RENEWAL OF MEMBERSHIP** of The Fund Under Section 16 A (1) Of The Gujarat Advocates' Welfare Fund Act, 1991
(As amended from time to time)

SECOND BLOCK PERIOD RENEWAL OF MEMBERSHIP

To,

The Secretary,

Bar Council of Gujarat,
3rd Floor, Satyamev Complex,
Opp. Gujarat High Court,
Sola, Ahmedabad - 380060

Subject : Application for SECOND BLOCK PERIOD Renewal of GAWF Membership

Sir,

I hereby apply to the Administrative Committee of the Bar Council of Gujarat for renewal of Gujarat Advocates Welfare Fund Membership and enclosed herewith a Demand Draft of **Rs.1000/- (Rupees One Thousand Only)** towards 2nd Block period Payment under GAWF Act,1991 by way of Demand Draft No. _____ Dated ____/____/20 drawn in favour of "Gujarat Advocate Welfare Fund Membership Registration Fee" Payable at **Ahmedabad**.

My Full Particulars (In Capital Letters)

- Name of the Advocate :** _____
(Applicant) Surname Name Middle Name
- Present Address :** _____

Pincode - _____
- Contact No. :** (1) _____ (2) _____
- Enrolment No. :** G/ _____ / _____
- Welfare Membership No.:** _____
- Name of the Bar Association of which the applicant is the member :** _____
- Verification by the office bearer/s of the Bar Association with Seal / Stamp :** _____

I verify that the information/Particulars furnished by me hereinabove are true and correct to the best of my knowledge and nothing has been kept concealed therein.

Date: _____

Place: _____

Signature of Member Advocate

(For Office use only)

Received a sum of **Rs.1000/- (Rupees One Thousand Only)** towards 2nd Block period Renewal Fee Payment under GAWF Act,1991 by way of D. D. No. _____ Dated ____/____/20 drawn on _____ in favour of "Gujarat Advocate Welfare Fund Membership Registration Fee" Payable at **Ahmedabad**.

Recpt. No. _____ **Date** ____/____/20

For Secretary
Bar Council of Gujarat

CBI BANK COPY (To be retained by concerned CBI Branch)	BAR COUNCIL OF GUJARAT COPY (To be sent by the candidate alongwith Welfare Form)	CANDIDATE COPY (To be retained by candidate, please make photocopy for record)																																																												
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