



**Form No. II**

(See Rule 8 Of the TamilNadu Societies Registration Rules,1978)

**CERTIFICATE OF REGISTRATION UNDER SECTION 10 OF THE TAMIL NADU**

**ACT, 1975 (TAMIL NADU ACT 27 OF 1975)**

**CERTIFICATE OF REGISTRATION OF SOCIETIES**

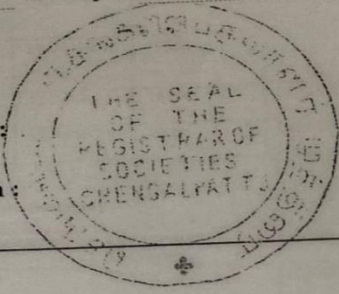
Sl. No. : 72 / 2013

I hereby Certify that  
**KARPAGA VINAYAGA INSTITUTE OF DENTAL SCIENCES-ALUMNI  
ASSOCIATION**


has this day been Registered Under The Tamil Nadu Societies Registration Act,1975  
(Tamil Nadu Act 27 of 1975).

Given under my hand at **CHENGELPET**  
this 7 th day of June 2013

Seal :  
Station :



Signature of the Registrar  
மாவல பதிவாளர்  
செங்கல்பட்டு

  
Dean  
KARPAGA VINAYAGA INSTITUTE OF DENTAL SCIENCES  
G.S.T. Road, Chinna Kolambakkam,  
Palayanoor Post, Madhuranthagam Taluk,  
Chengalpattu District-603 308.

**NAME AND ADDRESS OF BRANCH:**

Vaiyavoor  
CANARA BANK  
Canara Bank, Gst Road  
Padalam X Road  
VAIYAVOOR  
TAMIL NADU-603308

Contact details of Banking Ombudsman:  
Sujatha Elizabeth Prasad  
C/o. RBI  
Fort Glacis  
Chennai  
Chennai-600001  
Tel.No.04425399170/04425395964  
Fax.No.044 25395488 Email  
ID:bochennai@rbi.org.in

IFSC Code: CNRB0001888 MICR Code: 600015137  
Tel No: 123 Fax No:  
Email ID: cb1888@canarabank.com

**ACCOUNT DETAILS**

नाम Name(s)

खता सं. Account No. 1888101012173.

KARPAGA VINAYAGA INSTITUTE OF DENTAL  
SCIENCES ALUMNI ASSOCIATION

व्यवसाय Occupation

GST ROAD GHINNA KOLAMBAKKAM, PALAYANOR  
MADHURANTHAGAM, KANGHEEPURAM-603308-TN-INDIA

पता Address

76079561

ग्राहक आई डी Customer ID

जन्म तिथि Date of Birth

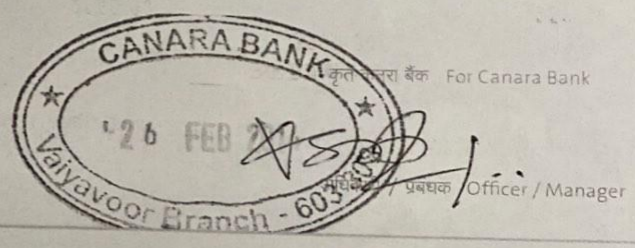
खाता खोलने की तिथि  
A/c Opened on

28-MAY-2013

नामांकित का नाम  
Name of Nominee

0

नामांकन की पंजीकरण संख्या  
Nomination Registration No.



Dean  
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