		Т	HIRD LEVEL SHO	G FEDERATION	(BLF) PROFILE		
BLF Name*:					Block Name*:		
BLF Registration No (if registered under any Act):			Share Capital if any:		CC/AC/CM Name (Facilitator from Project):		
Date of Renewal:			Monthly subscription amount of each SHG/VO/CLF*:		CC/AC/CM Contact number:		
BLF Office setup*:			Annual membership fee (if any):		BLF Book Keeper's Name:		
CLF Office Address:			Formation/Restruture Date*:		BLF Book Keeper's Contact number:		
			Monthly EC Meeting Date1*:		Monthly EC Meeting Date2 (if any):		
			DET	AILS OF BANK	ACCOUNTS	(Attach xerox	copy of Bank Pass Book
BLF General A/c No*:			Bank Name*:			Branch Name*:	
BLF CIF A/c No:			Bank Name:			Branch Name:	
D	ETAILS OF REPRE	SENTATIVES F	ROM SECOND L	EVEL FEDERAT	TION (CLF) TO BLF ((BLOCK LEVEL FEDERATION)	
CLF Name	e*	NRLM CLF_Code *	Date of joining in BLF*		sentatives of CLF to BLF*	Designation in EC of BLF*	Mobile Number* (Mandatory for BLF's President and Secretary)

CLF Name*	NRLM CLF_Code *	Date of joining in BLF*	Name of representatives of CLF to BLF*	Designation in EC of BLF*	Mobile Number* (Mandatory for BLF's President and Secretary)
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^{*} Fileds are mandatory.