For	Office	use	only	

In ward No _____



Mobile No. :		
Serial No		
Form No : 10	C (E D C)	

EMPLOYEES PENSION SCHEME, 1995

FORM TO BE USED BY A MEMBER OF THE EMPLOYEES' PENSION SCHEME, 1995 FOR CLAIMING WITHDRAWAL BENEFIT / SCHEME CERTIFICATE

			(Read the instruction	ns before filling up t	his form)		
1.	(a)	Name of the membe	r (in block letters)				
	(b)	Name of the claiman	t (s) :	•			
2.	Date o		. ,				
3.	Father	's Name					
٥.		nd's Name (If applicab	اما	***************************************	************************************		•
4.	Name	and Address of the the member was last e	Factory/Establishment	t in			
5.	Code I	No. & Account No.		Region / SRO Estt. Code No	<u> </u>	A/c No.	
5A	Date o	of Joining the Estt.		M6665344466653444665334466653444665344		***************************************	
6	Reaso	n for leaving service of leaving Service	&				
7.	Full Ac	ddress (in block letters)	ı				
			Shri/Smt/Kumari S/o / W/o / D/o				
				nananamananamanamanamanamanamanamanaman	минататататататататататататататататата	Pin No.	amanamanamanamanamanamanamanamanamanama
•			0 45 4	v		. 7	
8. 9.	•	u willing to accept Schoulars of Family (Spouse		Yes		No V	
٦.	i di tict		e Date of Birt	•	with Member	Name of the guar	dian of mino
(a)	Family	members		·			
<u>(b)</u>	Nomin	nee	and the second s				
10.	In case	e of death of member a	after attaining the age	of 58 years withou	t filling the clain	n :-	
	(a)	Date of death of the r	member	-			
11.	(b)	Name of the Clamina of remittance (put a ticl	int(s) / and relationship				
11.	(a)	**	er at my cost to the add	• •	st item No. 7		
	(b)		ue sent direct for credit	to my SB A/c (Sc	heduled Bank)	V	
		Account No.	:	·			***************************************
		of the Bank (In block le	·	***************************************			
		Idress of the Branch (Ir	•				. And a few control of the few c
	IFSC:						
12.	Are yo	u availing pension und	er EPS-95 ?				
	If so, ir	ndicate	PPO No		By wh	nom issued	
Certifie	ed that th	he particulars are true	to the best of my know	rledge.			
					Signature or l	Left Hand Thumb	
Date:					impression of	f the Member / claim	ant (s)

All Forms Available at : www.patelconsultancy.in SURAT SURAT www.patelconsultancy.in

Advance Stamped Receipt

(To be furnished only in case of 8(b) above)

Received a sum of *	Rs	(Rupees	akar manana katalan dalama andahar mahabar mahada andah katalah katalah katalah mahada dalama dalama mahada ma	0	nly) from
Signature or Left / Righ	nt Hand thumb impression	n of the member	A	Affix 1.00 Rupee Revenue Stamp	
The details of wages a (Form 3A/7 (EPS) encl Wages (Basic + D.A.) Wages as on the date Period of non contribut	nd period of non-contributionsed for the period for which as on 15.11.95 (if application of exit	itory service of the m hich it was not sent to able)	ember are as und		me.
Date :			Signature of E	mployer / Authorised Official	
	(For	the use of commiss	sioner's office)		
Under Rs	lo	M.O. / Cł	eque.		
Passed for payment fo	r Rs (in words)	DOS JOHN HEIDO COMO VINNO VINN	NO LOCK WINE VINDO HAVE NOW WHAT THEN YOURS HAVE VINDO HAVE NOW WHAT THEN YOUR HAVE VINDO HAVE NOW WHAT WHAT THEN YOUR FIRM YOU	contrates School Access
M. O. Commission (if a Towards withdrawal be		net amount to	be paid by M. O.		
D. H.		S. S.		A. AO	
		(For use in Cash	Section)		
Paid by inclusion in cheque No		D	ated	vide Cash Boo	ık (Bank)
	S. S.		AC (Cash)		
For issue of S. S. ; IDS	is enclosed				
D. H.	S. S.	A. A(Э.	APFC (A/cs)	
	(F	For use in Pension	n Section)		
Scheme Certificate bea	aring the control No		issued on _	and	d entered
D. H.	S. S.	A. A(Э.	APFC (Pension)	