FORM-F

APPLICATION FOR FINAL PAYMENT OF BALANCE IN THE PROVIDENT FUND ACCOUNT OF A DECEASED GOVERNMENT EMPLOYEE

	1.	Name of the Government Servant :					
		Account No.	:				
	3.	Post held by the Govt. Servant					
	4.	Date of death					
	5.	Proof of death, if available					
	6.	6. Balance at credit of the subscriber on the date of death, if known					
	7.	Details of the nominees alive on the date death of the subscriber, if a nomination subsists.					
		Name of nominee	Relation with the subscriber	Share of the	nominee		
i) ii) iii)	0						
	8.	In case no nomination subsists, the details of the surviving member of the family on the date of death of the subscriber					
		Name	Relationship with the subscriber	Age on the date of death	Address		
i)							
ii)							
iii)							

	ne claim should be supported by letter of page to a minor the claim should be supported	probate or succession certificate and in case d by Guardianship certificate)				
Remarks,	if any					
Place Date Memo No		Signature of the claimant Full name and address Date				
		eneral Provident Fund for verification of the ar furnished above have been duly verified.				
1. The G.P.F. Accounts No. of Sri/Smt/Kumari						
2. 3.	He/She died on					
	Advance	Wtihdrawals				
	Signature of Head of Office/Department.					
(Fo	(For the use in the General Provident Fund section of Finance Department)					
Me	emo No	Dated :				
Ce	Certified that the subscriber has the following balance at his/her credit as on					

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i)	Closing balance at the end of previous financial year		
ii) 	Advance/withdrawals during the year Rs.		
iii) 	Credit from to Rs.		
iv)	Net balance at credit Rs		
	Signature of Ledger Keeper G.P.F.	Signature of Officer In-charge of Designation :	