

## Form No. 20

## THE EMPLOYEES PROVIDENT FUNDS SCHEME, 1961

[ Paragraph 77(5) ]

J&K State  
Government

Form to be used by nominee of a member of the family under para 7(5) of the Employees Provident Funds Scheme, 1961.

Name and address of the deceased.....  
 Father's Name (or husband's Name).....  
 In case of a married woman.....  
 Date of death.....  
 Last employed in.....  
 Account No. in the Fund.....

I/we, following, being members of the family/nominees of the above named deceased apply for the payment of the accumulations standing to the credit of the deceased in the Fund.

Name and address	Sex	Age or year of birth	Marital Status	Relationship with the deceased	Name of the guardian/Manager in case of minor lunatic	Remarks
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Note :—(A family means as defined in para 2 (g) of the Employees Provident Funds Scheme, 1961). Please state whether the payment is to be made by (i) Postal Money Order at the cost of the payee or (ii) by crossed cheque sent through order at the cost of the payee's postal saving bank account if any..... Give Account No. and the name of the Post Office in which the account as been opened.

1. Married daughter or unmarried daughters of a deceased son should state in the remark column whether their husbands are alive.
2. To the best of my/our knowledge a posthumous child will not be born to the deceased member.
3. I/we declare that the particulars given above are true to the best of my/our knowledge.

Attested  
 (Employer/Gazetted Officer/  
 Magistrate)

Signature or left hand  
 thumb impression.