(FOR USE BY HEAD OF OFFICE)							
Forwarded to the Accountant-Generalfor necessary action.							
2. The Provident Fund Account No. of Shri/Shrimati/Kumari (as certified from the statements furnished to him/her from year to year is							
3. He/She is due to retire from Government service on							
4. Certified that he/she/had taken the following advances in respect of which							
credited to the Fund Account. The details of the final withdrawals granted to him/her are also indicated below-							
Temporary Address Final withdrawals							
. 1	****						
2							
3							
l   4							
5							
l 6							
5. ***							
Signature of the Head of O	ffice						

## FORM 2

FORM OF APPLICATION FOR FINAL PAYMENT OF BALANCES IN THE PROVIDENT FUND ACCOUNT OF A SUBSCRIBER TO BE USED BY THE NOMINEES OR ANY OTHER CLAIMANTS WHERE NO NOMINATION SUBSISTS

To								
	The Accountant-General,							
	(Through the Head of Office)							
Sir				×				
It is requested that arrangements may kindly be made for the payment of the accumulations in the								
1.	Name of Government servant							
2.	Date of birth							
3.	Post held by Government servant							
4.	Date of death							
5.	Proof of death in the form of a de by the municipal authorities, etc., i		•••••					
6.	Provident Fund Account No. allot	ted to subscriber						
7.	Amount of Provident Fund money standing to the credit of the subscriber at the time of his death, if known							
8.	Details of the nominees alive on the	ne date of death of the subsc	criber if a ne	omination subsists	<b>:</b>			
	Name of nominee	Relationship with the su	bscriber	Share of the	nominee			
	1							
	2							
	3							
	4							
9.	In case the nomination is in favour of a person other than a member of the family, the details of the family if the subscriber, subsequently acquired a family:							
	Name	Relationship with the su	bscriber	Age on the date	e of death			
	1							
	2							
	3							
	4							

Name	r. Relationship with	the subscriber	Age on the date of death
1			
2			
3			* ************************************
4			
<ol> <li>In the case of amount due to a mother (widow of subscriber) is not should be supported by Inde Guardianship certificate, as the ca</li> </ol>	a Hindu, the claim mnity Bond or		
<ol> <li>If the subsriber has left no family a Fund money is payable (to be sup</li> </ol>			
Name	Relationship with	the subscriber	Address
2			
3			
4	ne office ofnection the followin	/throu	gh the
4	ne office ofnection the followin	/through documents duly	gh theattested Officer
4	ne office ofnection the followin	g documents duly	gh theattested Officer
4	ne office of nection the followin - on eer impression ants)	g documents duly	gh theattested Officer
4	ne office ofnection the followin  on eer impression ants) ate	g documents duly	gh the attested by a Gazetted Officer
4	ne office ofnection the followin  on eer impression ants) ate	g documents duly	gh theattested by a Gazetted Officer
4	ne office ofnection the followin  on eer impression ants) ate	g documents duly	gh the Gazetted Officer
4.  13. Religion of the claimant(s)  14. The payment is desired through the Treasury/Sub-Treasury. In this conservice/Magistrate are attached:—  (i) Personal marks of identification (ii) Left/Right hand thumb or fing (in the case of illiterate claims (iii) Specimen signatures in duplic (in the case of literate claims).	ne office ofnection the followin  on eer impression ants) ate	g documents duly	gh theattested by a Gazetted Officer
4.  13. Religion of the claimant(s)  14. The payment is desired through the Treasury/Sub-Treasury. In this conservice/Magistrate are attached:—  (i) Personal marks of identification (ii) Left/Right hand thumb or fing (in the case of illiterate claims (iii) Specimen signatures in duplic (in the case of literate claims).	ne office ofnection the followin  on eer impression ants) ate	g documents duly	gh theattested by a Gazetted Officer  Yours faithfully
4.  13. Religion of the claimant(s)  14. The payment is desired through the Treasury/Sub-Treasury. In this conservice/Magistrate are attached:—  (i) Personal marks of identification (ii) Left/Right hand thumb or fing (in the case of illiterate claims (iii) Specimen signatures in duplic (in the case of literate claims).	ne office ofnection the followin  on eer impression ants) ate	g documents duly	yours faithfully (Signature of claimant)
4	ne office ofnection the followin  on eer impression ants) ate	g documents duly	yours faithfully (Signature of claimant)

(FOR USE OF HEAD OF OFFICE/DEPARTMENT)						
Forwarded to the Accountant-General for necessary action. The particulars furnished above have been duly verified.						
2. The Provident Fund Account No of Shri/Shrimati/Kumari						
to him/her) is						
3. He/She died on						
4. The last fund deduction was made from his/her pay for the month of drawn this Office Bill No						
Cash Voucher No						
5. Certified that he/she was neither sanctioned any temporary advance nor any final withdrawl from his/ her Provident Fund Account during the 12 months immediately preceding the date of his/her death.						
Or						
Certified that the following temporary advances/final withdrawals were sanctioned to him/her and drawn from his/her Provident Fund Account during the 12 months immediately preceding the date of his/her death.						
Name Relationship with the subscriber Address						
1						
2						
3						
4						
6. ***						
7. It is certified that no demand/following demands of Government is/are due for recovery.						
8. Certified that no advance/following advance sanctioned in terms of the Ministry of Finance, Office Memorandum No. 10(3)-E.V. (A)/65, dated the 1st November, 1965, is due for recovery.						
(Signature of the Head of Office/Department)						
(Signature of the Head of Office/Department)						
NOTE— Certificate No. 7 to be furnished in the case of CPF only.						