FORM 'F'

See sub rule(1) of Rule 6

Gratuity Nomination Form

To
TATA Consultancy Services Ltd.
9th Floor, Nirmal Building,
Nariman Point, Mumbai - 400021.

- I, <u>Mr. SHIVACHARAN RACHAKONDA</u> whose particulars are given in the statement below, hereby nominate the person(s) mentioned below to receive the gratuity payable after my death as also the gratuity standing to my credit in the event of my death before that amount has become payable, or having become payable has not been paid and direct that the said amount of gratuity shall be paid in proportion indicated against the name(s) of the nominee(s).
- 1. I hereby certify that the person(s) nominated is/are a member(s) of my family within the meaning of clause (h) of Section 2 of the Payment of Gratuity Act,1972. **Yes**
- 2. I hereby declare that I have no family within the meaning of clause (h) of Section 2 of the said Act. No
- 3.(a) My father is not dependent on me. Yes
 - (b) My mother is not dependent on me. Yes
 - (c) My spouse's father is not dependent on my spouse. No
 - (d) My spouse's mother is not dependent on my spouse. No
- 4. I have excluded my husband from my family by a notice dated the ______ to the controlling authority in terms of the provison to clause (h) of Section 2 of the said Act. **No**
- 5. Nomination made herein invalidates my previous nomination. Yes

Nominee(s)

Sr. No	Name in full with full Address of Nominee(s)	Relationship with the Employee	Date Of Birth	Proportion by which Gratuity will be shared	Name , Relationship and Address of Guardian if Nominee is minor
1	Mr. Shyamsunder	Father	05/02/1960	50	
	Rachakonda				
	wattimarthy, chityala, Near				
	venugopala swamy temple,				
	Nalgonda, Nalgonda,				
	Telangana, India - 508254				
2	Ms. Andalu Rachakonda	Mother	08/07/1964	50	
	Wattimarthy, chitayala, Near				

venugopala swamy temple,		
Nalgonda, Nalgonda,		
Telangana, India - 508254		

Statement							
Full Name:	Mr. SHIVACHARAN Er RACHAKONDA	Employee Number:					
Sex:	Male Da	ate of joining:	2021-06-16 00:00:00				
Marital Status: Religion: Permanent Address:	Married De Hindhu 3-51, WATTMARTHY, CHITYALA, NALO	epartment: GONDA, Nalgonda, 1	Computer Consultancy Felangana, India - 508001				
Date: Place:			Signature of the Employee				
Declaration by Witnesses							
Nomination signed before me							
Sr.No Name in full with full address of Witnesses Date:							
1							

Certificate by the Employer

Place:

Date:

Certified that the particulars of the above nominations have been verified and recorded in this establishment

Office Seal Signature of the Employer/Trustee

Acknowledgement by the Employee

Received the duplicate copy of nomination in Form 'F' filed by me and duly certified by the employer.

Date:	Signature of the Employee