The Employees' Pension Scheme, 1995



FORM 2 EMPLOYEES' PROVIDENT FUNDS SCHEME, 1952

[Paragraphs 33 AND 61(1)] EMPLOYEES' PENSION SCHEME, 1995

[Paragraphs 18]

DECLARATION AND NOMINATION FORM UNDER THE EMPLOYEES' PROVIDENT FUNDS SCHEME AND EMPLOYEES' PENSION SCHEME

1. UAN : 102226316365

2. Name (in block letters) : JEYAKUMAR N K

3. Father's / Husband's Name : KUMARAN4. Date of Birth : 30/09/2003

5. Gender : MALE

6. Marital Status : UN-MARRIED

7. Address (Permanent) : 3117, TNHB Colony, Mela Anuppanadi, Madurai, MADURAI, TAMIL NADU,

625009

8. Address (Temporary) : 3/61C, Kanpalayam 1st Street, Munichalai Road, Madurai, MADURAI, TAMIL

NADU, 625009

9. (A) Date of Joining of EPF : 26/07/2025

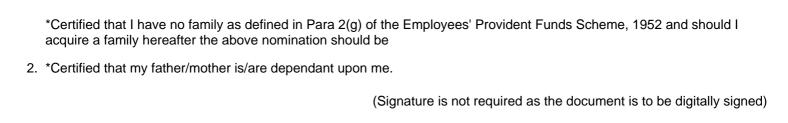
(B) Date of Joining of FPS : --

(C) Date of Joining of EPS : 26/07/2025

PART A (EPF)

I hereby nominate person(s) / cancel the nomination made by me previously and nominate the person(s) mentioned below to receive the amount standing to my credit in the

Name of the Nominee / Nominees	Address	Nominees's relationship with the Member	Date of Birth	Total amount or share of accumulations in Provident Fund to be paid to each nominee	If the Nominee is minor, name and relationship and address of the guardian who may receive the amont during the minority of
(1)	(2)	(3)	(4)	(5)	(6)
N K KUMARAN AADHAAR: XXXX XXXX 7027 Bank A/c: NOT AVAILABLE	3117, TNHB Colony, Mela Anuppanadi, Madurai, MADURAI, TAMIL NADU, 625009	Dependent Father	20/04/1963	50%	
SHANTHI KUMARAN AADHAAR: XXXX XXXX 0064 Bank A/c: NOT AVAILABLE	3117, TNHB Colony, Mela Anuppanadi, Madurai, MADURAI, TAMIL NADU, 625009	Dependent Mother	21/01/1972	50%	



PART B (EPS) (Para 18)

I hereby furnish below particulars of the members of my family who would be eligible to receive widow / children pension in the event of my death:

SI. No.	Name of the Family members	Address	Date of Birth	Relationship with the
(1)	(2)	(3)	(4)	(5)
1				

*Certified that I have no family as defined in Para 2(vii) of the Employees' Pension Scheme, 1995 and should I acquire a family hereafter I shall furnish particulars thereon in

I hereby nominate the following person for receiving the monthly widow pension admissible under para 16(2)(a)(i) and (ii) in the event of my death without leaving any

Name and Address of the Nominee	Date of Birth	Relationship with the member
N K KUMARAN AADHAAR: XXXX XXXX 7027 Bank A/c: NOT AVAILABLE	20/04/1963	FATHER

Date 04-Aug-2025

(Signature is not required as the document is to be digitally signed)