

Form Type 1



5423-1118-0000

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First Name: J O H N

Last Name: D O E

Address: INFOSYS LTD
HINJEWADI PHASE 2
PUNE

Gender: ☒ Male
☐ Female

ID Proof: ☒ Aadhar Card
☒ PAN Card
☐ Passport

Date (DDMMYYYY): 1 0 0 6 1 9 9 1

Mobile No: 9 9 0 8 9 6 7 8 8 8

