



ONLINE TRANSFER CLAIM FORM [FORM 13 (REVISED)]
(Tracking ID 999240051705010091083)
(Submitted through the member log-in 8363496)
Claim Date : 01-05-2017

EMPLOYEES' PROVIDENT FUND SCHEME, 1952
(PARA 57)

(This form has been printed on the basis of Online Transfer Claim Form filled up by the member for submission to the employer)

To,
The Regional P.F. Commissioner,
BANGALORE
KN KN

Sir,
I request that my Provident Fund balance along with my Pension Service Details may please be transferred to my present account under intimation to me. My details are as under:

PART A: PERSONAL INFORMATION

1. Name : MUKESH KUMAR PRASAD
2. Mobile Number : 9742142730
3. E-mail id : mysticmukesh@gmail.com
4. Bank Account Number : 5225525813
5. Bank IFSC : CITI00000004

PART B: DETAILS OF PREVIOUS ACCOUNT (WHICH IS TO BE TRANSFERRED)

1. P.F. Account No. (with EPFO office) : BGBNG13700950000000575
2. Name of the Establishment : HP PPS INDIA OPERATIONS PRIVATE LIMITED
3. Address of the Establishment : 24, SALARPURIA ARENA HOSUR MAIN ROAD, ADUGODI
BANGALORE 656 KN 560030
4. PF A/C No. held by : BANGALORE
5. Name of the Trust : Not Applicable
6. PF A/C No. in Trust : Not Applicable
7. Member Name : MUKESH KUMAR PRASAD
8. Date of Birth : 12-05-1985
9. Father's/Spouse Name : JAYNATH PRASAD
10. Relationship : FATHER
11. Date of joining : 01-09-2015
12. Date of leaving : 09-09-2016

PART C: DETAILS OF PRESENT ACCOUNT

1. P.F. Account No.(with EPFO : TNMAS00313090000388193 office)
2. Name of the Establishment : COGNIZANT TECHNOLOGY SOLUTIONS INDIA PRIVATE LTD
3. Address of the Establishment : NEW NO.165 MENON ETERNITY BUILDING ST.MARYS ROAD ALWARPET CHENNAI 685 TN 600018
4. PF A/C No. held by : CHENNAI
5. Name of the Trust : Not Applicable
6. PF A/C No. in Trust : Not Applicable
7. Bank Account Number of Trust : Not Applicable
8. IFS Code of the Bank Branch : Not Applicable of Trust where account is maintained
9. Member's Name : Mukesh Kumar Prasad
10. Father's/Spouse Name : Jaynath Prasad
11. Relationship : FATHER
12. Date of joining : 12-09-2016

I, Certify that all the information given above are true to the best of my knowledge and I have ensured the correctness of my present and previous account numbers.

Signature of the member

Note: Member should take a printout of this form and a signed copy of the same should be submitted to the Previous Establishment i.e. HP PPS INDIA OPERATIONS PRIVATE LIMITED.