

Employee Id :52225868
Mobile No. : 8887660286
Email-Id :
MUSHABRAHMAN02@GMAIL.COM

FORM - 19
EMPLOYEES' PROVIDENT FUND ORGANIZATION
COMPOSITE CLAIM FORM (NON-AADHAAR)

- | | | | |
|-----|--|---|---|
| 1) | Claims Applied for | : | I) Final PF Settlement () |
| 2) | Name of the member (In Capital Letters) | : | Mushab Rahman |
| | a) Universal Account Number (UAN) | : | 0 |
| | b) PF Account No. | : | GN/GGN/005572/000644746 |
| 3) | Name and address of the Factory/ Establishment in which the member was last employed | : | HCL TECHNOLOGIES LIMITED |
| 4) | Aadhaar No./Aadhaar Enrollment No. | : | 317675540572 |
| 5) | Father's Name/Husband's Name | : | Mohd Shakeel Siddiqui |
| 6) | Date of Birth | : | 29/11/1999 |
| 7) | Date of Joining the establishment | : | 27/11/2023 |
| 8) | Date of leaving service | : | 30/06/2025 |
| 9) | Permanent Account No. (PAN) | : | EKEPR0544E |
| 10) | Reason for leaving service | : | RESIGNATION |
| | | | A/C No.: 021401547404 |
| 11) | Bank Account details for Payment | : | Name of the Bank : ICICI BANK LTD IFSC Code :ICIC0000214 |

CERTIFIED THAT THE PARTICULARS ARE TRUE TO THE BEST OF MY KNOWLEDGE

The member hereby declares that he/she has not been employed in any factory/establishment to which the Act applies for continuous period of not less than 2 months immediately preceding the date of my application for final withdrawal of my provident fund money.

Certified that the particulars are true to the best of my knowledge.

Date : 14-Sep-2025

Mushab Rahman

**Signature or Left hand thumb
Impression of the member**

Signature of the employer or Authorised official