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 : 102220282377

2. Name (in block letters) : BAKI NAGA MALLESWARA RAO

3. Father's / Husband's Name : RAMESH BAKI

4. Date of Birth : 11/09/2003

5. Gender : MALE

6. Marital Status : UN-MARRIED

7. Address (Permanent) : 61-9/4-8, Siti Cable Road, Gummala Lakshmanarao Street, Vijayawada,

NTR, ANDHRA PRADESH, 520013

8. Address (Temporary) : 61-9/4-8, Siti Cable Road, Gummala Lakshmanarao Street, Vijayawada,

NTR, ANDHRA PRADESH, 520013

9. (A) Date of Joining of EPF : 10/07/2025

(B) Date of Joining of FPS : --

(C) Date of Joining of EPS : 10/07/2025

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)
BAKI RAJESWARI DEVI AADHAAR: XXXX XXXX 0443 Bank A/c: NOT AVAILABLE	61-9/4-8, Siti Cable Road, Gummala Lakshmanarao Street, Vijayawada, NTR, ANDHRA PRADESH, 520013	Dependent Mother	04/02/1986	50%	
BAKI RAMESH AADHAAR: XXXX XXXX 9743 Bank A/c: NOT AVAILABLE	61-9/4-8, Siti Cable Road, Gummala Lakshmanarao Street, Vijayawada, NTR, ANDHRA PRADESH, 520013	Dependent Father	07/07/1979	50%	



quire a family hereafter the above nomination should be ertified that my father/mother is/are dependant upon m	
(\$	Signature is not required as the document is to be digitally signed)

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
BAKI RAMESH AADHAAR: XXXX XXXX 9743 Bank A/c: NOT AVAILABLE	07/07/1979	FATHER

Date 22-Jul-2025

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