

ANNEXURE-II

To,
The Regional Provident Fund Commissioner,
Employees PF OrganizationJoint Declaration Form

I, ARUN S.S
Having UAN 100091013072 PF
account THA0043355000033552 and Aadhaar 614363785324 is/ was
with establishment M/S CAPGEMINI. The personal details furnished
to EPFO earlier were found to be incorrect /blank, and therefore request for
change/updation in the member profile as follows.

S. No.	Details/particulars	Incorrect details	Correct details
1	Aadhaar	BLANK	614363785324
2	Name	ARUN SIDDAPPA	ARUN S.S
3	DOB		
4	Gender		
5	Father/husband		
6	Relationship		
7	DOJ		
8	DOL		
9	Reason of leaving		
10	Marital Status		
11	Nationality		

I, ARUN S.S s/o SIDDAPPA SETTY S.S, authorized signatory of
the establishment, have verified the request, document attached and the records of
the establishment and certify that the facts mentioned above are correct. I am also
enclosing 2-Aadhar card, PAN card
and (documents of Establishment) in
support of the request of the employee mentioned above.

We, ARUN S.S (Employee) and
(Authorized Signatory) hereby declare we have not concealed any facts and the
above- mentioned facts are correct. We also indemnify that in case of wrong
payment/over payment/under payment because of the above furnished information
shall be jointly held responsible.

Authorized signatory

Name & sign of member

GGID-

Mail ID- arunshetty@outlook.comMobile No- 9035550309