

Payment of Gratuity (Central) Rules

FORM 'F'

See sub-rule (1) of Rule 6

Nomination

To,

Wells Fargo International Solutions Private Limited
(Formerly known as Wells Fargo India
Solutions Private Limited)
Embassy Tech Village (SEZ),
Devarabeesanahalli, Outer Ring Road,
Varthur Hobli, Bengaluru – 560103, India.

I, Shri/Shrimati/Kumari ASRAR FAROOQ BHAT

(Name in full here)

whose particulars are given in the statement below, hereby nominate the person(s) mentioned below to receive the gratuity payable after my death as also the gratuity standing to my credit in the event of my death before that amount has become payable, or having become payable has not been paid and direct that the said amount of gratuity shall be paid in proportion indicated against the name(s) of the nominee(s).

- I hereby certify that the person(s) mentioned is/are a member(s) of my family within the meaning of clause (h) of Section 2 of the Payment of Gratuity Act, 1972.
- I hereby declare that I have no family within the meaning of clause (h) of Section 2 of the said Act.
- (a) My father/mother/parents is/are not dependent on me.
(b) My husband's father/mother/parents is/are not dependent on my husband.
- ~~I have excluded my husband from my family by a notice dated the _____ to the controlling authority in terms of the proviso to clause (h) of Section 2 of the said Act.~~
- Nomination made herein invalidates my previous nomination.

Nominee(s)

	Name in full with full address of nominee(s)	Relationship with the employee	Age of nominee	Proportion by which the gratuity will be shared
	(1)	(2)	(3)	(4)
1.	FAROOQ AHMAD BHAT Mishra, Sheeri Baramulla J&K 193101	Father	52 years	33%
2.	Shameema Begum. Mishra Sheeri, Baramulla J&K 193101	Mother	41 years	33%
3.	Wajahat Farooq Bhat Mishra Sheeri, Baramulla J&K 193101	Brother	26 years	34%
4.				

Statement

1. Name of employee in full Asrar Farooq Bhat
2. Sex Male
3. Religion Islam
4. Whether unmarried/married/widow/widower Unmarried
5. Department/Branch/Section where employed _____
6. Post held with Ticket No. or Serial No., if any _____
7. Date of appointment 22-08-2022
8. Permanent address:
Village Nisheer Thana Sheeri Sub-division _____
Post Office Baramulla District Baramulla State Jammu & Kashmir
Place: Bangalore U9810
Date: 22-08-2022 Signature/Thumb-impression of the Employee

Declaration by Witnesses

Nomination signed/thumb-impressed before me

Name in full and full address of witnesses.

Signature of Witnesses.

1. Kaushik Dhulipala, MSR Nagar, Bangalore 1. Kaushik
2. Danish Kalam, MSR Nagar, Bangalore 2. Danish Kalam
Place: Bangalore
Date: 22-08-2022

Certificate by the Employer

Certified that the particulars of the above nomination have been verified and recorded in this establishment.

Employer's Reference No., if any _____

Signature of the employer/Officer authorised
Designation

Danish

Date: _____

Name and address of the establishment or
rubber stamp thereof.

Acknowledgement by the Employee

Received the duplicate copy of nomination in Form 'F' filed by me and duly certified by the employer.

Date: 22-08-2022

U9810
Signature of the Employee

Note.—Strike out the words/paragraphs not applicable.