

## Form-I

Employee No. 1253592

## NOMINATION AND DECLARATION FORM

[See Rule 3]

1. Name of person making nomination (in block letters) \_\_\_\_\_ SATHYA NARAYANAN SUDHAKAR \_\_\_\_\_

2. Father's/~~Husband's~~ Name \_\_\_\_\_ SUDHAKAR G \_\_\_\_\_

3. Date of Birth \_\_\_\_\_ 20/08/1989 \_\_\_\_\_

4. Sex \_\_\_\_\_ MALE \_\_\_\_\_

5. Marital Status \_\_\_\_\_ MARRIED \_\_\_\_\_

6. Address:

Permanent \_\_\_\_\_ B6 SATHYANAND NIKETAN, SHIVA NAGAR, KALAPATTI, KALAPATTI 641048

Present \_\_\_\_\_ B+14, PHASE 2, PARSN PALM LEGEND, ONDIPUDUR, COIMBATORE 641016 \_\_\_\_\_

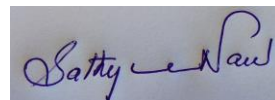
I hereby nominate the person(s)/cancel the nomination made by me previously and nominate the person(s) mentioned below to receive any amount due to me from the employer, in the event of my death.

Name of the nominee/ nominees	Address	Nominee's relationship with the member	Date of Birth	Total amount of share of accumulations in credit to be paid to each nominee	If the nominee is minor, name, relationship and address of guardian who may receive the amount during the minority of nominee
(1)	(2)	(3)	(4)	(5)	(6)
<b>SOUNDARYAAS</b>	<b>B6, SATHYANAND NIKETAN, SHIVA NAGAR, KALAPATTI, COIMBATORE 641048</b>	<b>WIFE</b>	<b>02/01/1992</b>	<b>50</b>	JASHWANTH KRISHNAA SN, SON JIIVESH KRISHNAA SN, SON  111 ALAGU ILLAM, SUBBAIA NAGAR, T. KOTTAMPATTI, POLLACHI, COIMBATORE 642002
SULOCHANA	B6, SATHYANAND NIKETAN, SHIVA NAGAR, KALAPATTI, COIMBATORE 641048	MOTHER	29/05/1965	25	
SUDHAKAR	B6, SATHYANAND NIKETAN, SHIVA NAGAR, KALAPATTI, COIMBATORE 641048	FATHER	19/03/1955	25	

&lt; Total % of share should be 100% &gt;

1. Certified that I have no family and should I acquire a family hereafter, the above nomination shall be deemed as cancelled.
2. Certified that my \*father/mother is/are dependent upon me.

\*Strike out whichever is not applicable



Signature or the thumb impression of the employed person.

### **CERTIFICATE BY EMPLOYER**

Certified that the above declaration and nomination has been signed/thumb impressed before me by  
Shri/Smt/Kum\_\_\_\_\_employed in my establishment after he/she has read the entry/entries  
have been read over to him/her by me and got confirmed by him/her.

Signature of the employer or other authorized

Officer of the establishment and Designation

Place \_\_\_\_\_

Date \_\_\_\_\_

Infosys Limited,  
No.44, Electronics city,  
Hosur Road,  
Bangalore- 560100