

FORM B

[See Rule 4(1)]

This is to certify that I examined **Preetha Shanmuganathan** wife of Karthick Sankaran woman employee in **IQVIA RDS (INDIA) PVT LTD, Bangalore** (name of the establishment) on 26-Sep-2023 and found that she is pregnant and expected to be delivered of a child within one month / 30 days from the above-mentioned date.

Date: 26-09-2023

**Signature, Qualifications and Designation
of Medical Officer/ Medical Practitioner**

Definitions of 'Child' and 'Miscarriage' as in the Maternity Benefit Act, 1961:

1. 'Child' includes a still-born child;
2. 'Miscarriage' means expulsion of the contents of a pregnant uterus at any period prior to or during the twenty-sixth week of pregnancy but does not include any miscarriage, the causing of which is punishable under the Indian Penal Code.

Employee No: 1150183

FORM 'D'
[See Rule 5(1)]

NOTICE UNDER SECTION 6 OF THE MATERNITY BENEFIT ACT, 1961

Manager HR
M/s. Kavita Thumbla

I, **Preetha Shanmuganathan** wife of **Karthick Sankaran** employed as **India-Programmer at IQVIA RDS (INDIA) PVT LTD, Bangalore** hereby give notice that, I expect to be confined within six weeks next, following from the date of this Notice on 27-Sep-2023 and shall be absent from work from 25-Oct-2023 to 24-Apr-2024. I shall not work in any establishment during the period for which receive maternity benefit.

2. For the purpose of Section 7, I hereby nominate **Karthick Sankaran**, 4, Annai Nagar, N G O 'A' Colony Extension, Tirunelveli – 627007 to receive the maternity benefit and/or any other amount due to me under the Act in case of my death.

Signature of an attestor in case the woman is not able to sign and

**Signature or thumb-impression
affix thumb-impression of woman**

Date: 27-09-2023