

**Joint Declaration by Employer and Employee for Correction in Name/Date of Birth of member
and Name of father's name**

Date:

To

The Regional P.F. Commissioner,
Employees' P.F. Organisation,
Regional Office, Tambaram.

Sir,

Subject: Correction in the member's name/date of birth and father's name- Joint Declaration
by the Member and Employer -Reg.

We are hereby informing you the details of Correction in name/date of birth and father's name
of our employee, as follows:-

Particulars	Already furnished	To be corrected
EPF account Number	TB/TAM/	TB/TAM/
Name of the Member		
Father's/Husband's Name		
Date of birth (DD/MM/YYYY)		
Copy of Document enclosed in support of correction in name (v)	1. PAN Card 2. Voters ID card 3. Passport 4. Driving license 5. ESIC Identity Card 6. Aadhaar Card 7. Bank pass book 8. Education related Certificates 9. Birth Certificate issued by the Registrar of Births & Deaths.	
Copy of Document enclosed in support of correction in my date of birth (v).	1. Birth Certificate issued by the Registrar of Births & Deaths 2. Education related Certificates 3. Passport 4. Certificate based on the service records of the Central/State Government organisation.	

Please make the necessary correction in your PF records.

Thanking you,

Yours faithfully,


(Employee Signature)

Name and Address of the Employee.

VENKATA KIRAN POLINENI
GREEN FIELD APARTMENTS
F.No 501, VIJAYAPURI 6TH
LINE, GUNTUR, AP
- 522006.

Signature of the Authorized Signatory
with Establishment Seal

320 KYC

Select	Document Type	Document Number	Name as per Document
<input type="checkbox"/>	Bank	DOCUMENT NUMBER	NAME AS PER DOCUMENT
<input type="checkbox"/>	PAN	DOCUMENT NUMBER	NAME AS PER DOCUMENT
<input type="checkbox"/>	AADHAAR	DOCUMENT NUMBER	NAME AS PER DOCUMENT
<input type="checkbox"/>	Passport	DOCUMENT NUMBER	NAME AS PER DOCUMENT
<input type="checkbox"/>	Driving License	DOCUMENT NUMBER	NAME AS PER DOCUMENT
<input type="checkbox"/>	Election Card	DOCUMENT NUMBER	NAME AS PER DOCUMENT
<input type="checkbox"/>	Ration Card	DOCUMENT NUMBER	NAME AS PER DOCUMENT
<input type="checkbox"/>	National Population Register	DOCUMENT NUMBER	NAME AS PER DOCUMENT

Save
Cancel

ending KYC

URL	Document Type	Known as per Document	Document No	IFSC	Document Entry	Date
			Page 1 of 1	1		No records to show


PROVED KYC

[illegible]

P. V. O'Brien

आयकर विभाग
INCOME TAX DEPARTMENT
POLINENI VENKATA KIRAN
RAMANAIAH POLINENI
16/08/1989
Permanent Account Number
BVWPP6145D
P. V. Venkata Kiran
Signature

भारत सरकार
GOVT. OF INDIA



यह कार्ड के खोने / पाने पर कृपया सूचित करें / नोट करें:
आयकर देने सेना इकाई, एन एस डी एल
तीसरी मंजिल, सफापुर चेंबर,
बोनेर टेलिफोन एक्चेंज के नजदीक,
बोनेर, पुना - 411 045.

*If this card is lost / someone's lost card is found,
Please inform / return to:-
Income Tax PAN Services Unit, NSDL,
3rd Floor, Sapphire Chambers,
Near Bature Telephone Exchange,
Bature, Pune - 411 045.*

Tell 9) 2272 3408 / 2272 3409 / 2272 3410 / 2272 3411
e-mail: pan@nsdl.co.in

P. V. Venkata Kiran



भारत सरकार
GOVERNMENT OF INDIA



వేంకట కిరణ్ పోలినేని
Venkata Kiran Polineni
DOB: 16-08-1989
Gender: Male



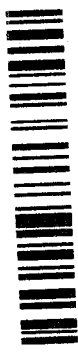
2271 6407 9419

भारत - आम आदमी का अधिकार



సామాన్య ప్రజల పర్యవేక్షణ ప్రాధికార సంస్థ
UNDAI SUPERVISION AUTHORITY OF

S/O: రమణయ్య పోలినేని, 1-41,
కొత్తపేట, దుర్గలూరు మండలం,
చాకలకోండ, చాకలకోండ, విజయవాడ,
నెల్లూరు, ఆంధ్ర ప్రదేశ్, 524221
Address:
S/o: Ramanaiah Polineni,
Kothapeta, Duttalur Mand
Chakalakonda, Chakalako
Vinjamur, Nellore, Andhr
Pradesh, 524221



1947
1800 300 1947
help@uidai.gov.in
www.uidai.gov.in
P.O. Bo
Bengali

P. V. Gopala

भारत गणराज्य REPUBLIC OF INDIA

राष्ट्र कोड / Country Code

પાસપોર્ટ નં./ Passport No.

IND

K8563762

उपनाम / Surname

POLINENI

दिया गया नाम / Given Name(s)

VENKATA KIRAN

Sex /

জন্মতারিখি / Date of Birth



16/08/1989

जन्म स्थान / Place of Birth

KOTHAPEETA, ANDHRA PRADESH



जारी करने का स्थान / Place of Issue

HYDERABAD

जारी करने की तिथि / Date of Issue

समाप्ति की तिथि / Date of Expiry

14/11/2012

13/11/2022

P<INDPOLINENT<<VENKATA<KIRAN<<<<<<<<<<<<<
K8563762<5IND8908168M2211134<<<<<<<<<<<<<

P. J. O'Brien

पिता / कात्नी अधियादक का नाम / Name of Father / Legal Guardian

RAMANAIAH POLINENI

माता का नाम / Name of Mother

JAYAMMA POLINENI

पति या पत्नी का नाम / Name of Spouse

पता / Address

H NO 161, KOTHAPETA VI, CHAKALAKONDA PO

DUTTALUR MDL, POTTI SRIRAMULU NELLORE

PIN: 524221, ANDHRA PRADESH, INDIA

पुराने पासपोर्ट का नं. और इसके जारी होने की तिथि एवं स्थान / Old Passport No. with Date and Place of Issue

फाइल नं. / File No.

HY5061523355112

K8563762



P. V. Vennu

UNITED STATES OF AMERICA



Control Number

20163212720001

POLINENI

Visa Type /Class

R HIB

Sex

Birth Date

Nationality

M

16AUG1989

IND

Issue Date

Expiration Date

M

18NOV2016

30SEP2018

0110

L7485461

PN-VEDICSOFT SOLUTIONS, LLC

P#-EAC1614651788

PED-30SEP2018

VNUSAPOLINENI<<VENKATA<KIRAN<<<<<<<<<<<<<<<<

K8563762<5IND8908168M1809303H8HYD0J8TX862105

P. V. Wilson



VEDICSOFT

Business Intelligence. Delivered.

100 Wood Ave South,
Suite 200,
Iselin, NJ 08830
Tel: (732) 906 3200
Fax: (732) 906 3210
www.vedicsoft.com

EMPLOYMENT AGREEMENT

This EMPLOYMENT AGREEMENT ("Agreement") is effective this 1 day of March 2015, between VedicSoft Solutions, LLC. located at 100 Wood Avenue South, Suite 200, Iselin, New Jersey 08830 (the "Company"), and Venkata Kiran Polineni, residing at LIG 141, Road # 2, KPHB Colony, HYD - 5000072, INDIA ("Employee") (collectively, the "Parties").

WHEREAS, the Company is in the business of providing software consulting services;

WHEREAS, the Employee desires to provide software consulting services to the Company; and

WHEREAS, the Company desires to employ the Employee only upon the terms and conditions set forth herein, and the Employee agrees to accept such employment.

NOW THEREFORE, in consideration of the mutual premises and agreements contained in this Agreement, and intending to be legally bound thereby, the Company and Employee hereby agree as follows:

ARTICLE 1

Engagement

The Employee represents that the Employee is not in any way restricted from entering into this Agreement, including by prior or existing agreement with any other person or entity, and hereby agrees to indemnify, defend (including paying the Company reasonable attorney's fees, and any and all other foreseeable costs) and hold the Company harmless with respect to all claims and suits as a result of any such prior or existing agreement. The Company hereby retains the Employee to provide computer consulting services in the full time position of a Java Developer for clients, vendors or end-clients (collectively referred to as "Clients"). The Employee agrees to the best of the Employee's ability to perform and render such services including, but not limited to, providing software consulting services for Clients. The Employee shall devote all of the Employee's working time to such services and duties. The Employee shall discharge the Employee's responsibilities pursuant to this Agreement competently, carefully and faithfully. In performance of the Employee's duties, the Employee shall comply with any and all of the Company's policies, rules, procedures, as well as all applicable local, state and federal laws, rules, regulations, statutes, ordinances and other provisions of law, and shall maintain a standard of professional conduct that is acceptable to the Company. The Employee agrees to provide status reports and timesheets to the Company on a periodic basis as required by the Company.

ARTICLE 2

Term

2.01 Initial Term. The initial term of this Agreement shall be for fifteen (15) months commencing on the date the Employee reports to work for the Company (the "Commencement Date") and expiring fifteen (15) months after the Commencement Date (the "Termination Date") subject, however, to earlier termination as hereinafter provided. Employee agrees that if an assignment or project extends or is ongoing after the Termination Date or the Employee is scheduled to start an assignment or project after the Termination Date, the term of this Agreement shall be automatically extended until the completion of the assignment or project (the "Term Date").

2.02 Damages for Breach of Term Provision. The Employee acknowledges the time, efforts and resources the Company has and agrees to expend in employing Employee. Employee understands that the Company is depending on the Employee to work on Company projects with Clients and that the Company will suffer damages if Employee terminates the employment prior to the Term Date or Termination Date. Employee acknowledges the time, effort and resources that the

Inc.
500

Business
500

FIFTY
Fastest Growing Companies

Inc.
500

TOP 2000
BUSINESS
XXX



ERNST & YOUNG
ENTREPRENEUR
OF THE YEAR

SiliconIndia

NJBIZ



VEDICSOFT
Business Intelligence. Delivered.

100 Wood Ave South,
Suite 200,
Iselin, NJ 08830
Tel: (732) 906 3200
Fax: (732) 906 3210
www.vedicsoft.com

such deficiencies.

8.11 Posting. Employee agrees to post Employee's Labor Condition Application ("LCA") at Employee's work site in at least two (2) conspicuous locations at the work site for a period of ten (10) consecutive work days and as required by law.

8.12 H-1B Compliance. Employee acknowledges Employee is working with the Company under an H-1B visa. Employee agrees to abide by all H-1B laws and regulations.

8.13 Entire Agreement. This Agreement contains the entire understanding between the Parties and supersedes, replaces, and takes precedence over any prior understanding, or oral or written agreement, between the Parties respecting the subject matter of this Agreement. There are no representations, agreements, arrangements, or understandings, oral or written, between the parties hereto relating to the subject matter of this Agreement which are not fully expressed herein. No modification, amendment or waiver shall be binding without the prior written consent of the Parties. Each party hereto represents and warrants that it has full power and authority to enter into this Agreement and to perform its obligations hereunder.

IN WITNESS WHEREOF, the parties have executed this Agreement as of the date above first written.

VEDICSOFT SOLUTIONS

By: *F. Mehta*

Company Representative Signature

Falguni Mehta - HR

Venkata Kiran Polineni

P. V. Ceceeni
Employee Signature

Employee's Passport No. K8563752

Dated: 02/16/2016.

Dated: 02/16/2016.

Inc. 500

Business Office

FIFTY

Inc. 500

TOP 2008 BUSINESS XXX



ENTREPRENEUR OF THE YEAR

SiliconIndia

NJBIZ