

#### ONLINE TRANSFER CLAIM FORM [FORM 13 (REVISED)]

(Tracking ID: 10052667187305001)

Claim Date: 22/09/2018

### EMPLOYEES' PROVIDENT FUND SCHEME, 1952

(PARA 57)

(This form has been printed on the basis of Online Transfer Claim Form filled up by the member under Unified Portal for submission to the employer.)

To,

The Regional P.F. Commissioner,

MALAD (KANDIVALI),

Bhavishya Nidhi Bhavan, Plot No.222, Sector No.3, Charkop Market, Kandivali (West)

Sir,

I request that my Provident Fund balance along with my Pension Service Details may please be transferred to my present account under intimation to me. My details are as under :

### **PART A: PERSONAL INFORMATION**

1. Name : CHALLAGULLA SRINIVASA KUMAR

2. Mobile Number : 9008955009

3. E-mail id : -

4. Bank Account Number : 50100058534391

5. Bank IFSC : HDFC0000240

# PART B: DETAILS OF PREVIOUS PF ACCOUNTS (WHICH IS TO BE TRANSFERRED)

1. PF Account No. (with EPFO office): KDMAL009268100E0049924

2. Name of the Establishment : J P MORGAN SERVICES INDIA PVT LTD

3. Address of the Establishment : THE EST CREATED ONLY FOR EXPEMTION CODE FROM EMP\_NO 9499

MUMBAI 598

4. PF A/C No. held by : TRUST

5. Name of the Trust : JP MORGAN SERVICES INDIA PVT LTD EMPLOYEES PROVIDENT FUND.

6. PF A/C No. in Trust : KDMAL009268100E0049924

7. Bank A/C No. of Trust : 00601110004395

8. IFS Code of the Bank Branch of

Trust where account is maintained: HDFC0000060

9. Member's Name : CHALLAGULLA SRINIVASA KUMAR

10. Date of Birth : 24/06/1983

11. Father's/Spouse Name : VASANTHARAO CHALLAGULLA

12. Relationship : FATHER

13. Date of joining : 21/01/2015

14. Date of leaving : 29/03/2017

# **PART C: DETAILS OF PRESENT PF ACCOUNT**

1. PF Account No. (with EPFO office): MHBAN00456650001141632

2. Name of the Establishment : ACCENTURE SOLUTIONS PVT. LTD.

3. Address of the Establishment : PLANT-3,GODREJ - BOYCE COMPLEX, LBS MARG, VIKHROLI 598

4. PF A/C No. held by : RO BANDRA(MUMBAI-I)

5. Name of the Trust : NOT APPLICABLE

6. PF A/C No. in Trust : NOT APPLICABLE

7. Bank A/C No. of Trust : NOT APPLICABLE

8. IFS Code of the Bank Branch of

Trust where account is maintained: NOT APPLICABLE

9. Member's Name : CHALLAGULLA SRINIVASA KUMAR

10. Date of Birth : 24/06/1983

11. Father's/Spouse Name : VASANTHARAO CHALLAGULLA

12. Relationship : FATHER

13. Date of joining : 07/04/2017

I, Certify that all the information given above are true to the best of my knowledge and I have ensured the correctness of my present and previous account numbers.

Signature of the member

Note : Member should take a printout of this form and a signed copy of the same should be submitted to the Previous Establishment i.e. J P MORGAN SERVICES INDIA PVT LTD