

(PART-B (EPS) Para - 18)

I hereby furnish below particulars of the members of my family who would be eligible to receive widow/children pension in the event of my death.

Sr. No.	Name of the Family Members	Address	Date of Birth	Relationship with the Member
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\*\* Certified that I have no family as defined in para 2(vii) of the Employees' Pension Scheme, 1955 and should I acquire a family hereafter I shall furnish particulars thereon in the above form.

I hereby nominate the following person for receiving the monthly pension (admissible under para 16 2(a) (i) &(ii) in the event of my death without leaving any eligible family member for receiving pension.

Name & Address of the Family Members	Date of Birth	Relationship with the Member
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(CERTIFICATE BY EMPLOYER)

Certified that the above declaration and nomination has been signed/thumb impressed before me by Shri/Smt./Kumari : SWATI AMBERKAR employed in my establishment after he / she has read the entries / entries have been read over to him /her by me and got conformed by him / her.

Place :

Signature of the Employer or Authorised Officer of the Establishment

Date : 27/03/2020

Designation :

Date : 27/03/2020

\* Strike out whichever is not applicable

Signature or thumb impression of the subscriber

Name and address of the Factory / Establishment or Rubber Stamp Thereon