CERTIFICATE

	This is to certify that Shri				
an	employee of M/s				
	aring Account Noand mo				
	He has left behind him the	followir	ng persons being the	e members	of his Family.
S. No.	Name	Sex	Exact Age or Date Of Birth	Marital Status	Relationship wit deceased member
fan	It is also certified that th			ist of the	members of the
For the purpose of the certificate "Family" means 'Family' as defined in para (2)(g) of the Employees' Provident Fund Scheme, 1952.					
Pla	ce:				
Da	te:		Signature & Designation		
OFFICE SEAL					