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## **EMPLOYEES' PROVIDENT FUND ORGANISATION Composite Claim Form in Death Cases**

[Form-20 (PF Payment)/Form-10-D (Pension), Form - 5 IF (EDLI)]

1	Tick whicher is/are applic		Provident Fund ( )	(ii) Pension ( Type of Pension	(ii) Pension ( ) (iii) Insurance [EDLI] ( ) Type of Pension claim:				
2	Name of the deceased member (in CAPITAL letters)								
3	(a) Father's Name : (b) Spouse's Name :			a) b)					
4	Marital statu	is of deceas	ed member						
	a) Aadhar N	umber of th	ne deceased member (if availab	le)		~			
5	b) Universal Account Number (UAN)								
	c) PF Account Number (in case UAN not available)								
6	Date of Leaving service								
7	Period of No	n-Contribut	tory service (Year/Month/Days	)					
8	Date of death of the member								
9	Whether the	e member h	ad died while in service(Yes/	No)					
		CLAIMA	NT'S DETAILS FOR PROVI	DENT FUND, PENS	ION AND I	NSURAN	CE (EDL	()	
	Particulars o	of the claima	ant/minor/nominee(s)/legal he	eir(s)/surviving family	y member o	n whose b	ehalf the	claim is su	bmitted
	S.	S. Name Father's / Spouse's Name		Aadhar Number	Aadhar Number Gender	Date of	Marital	Relationship with	
	N.	Marine	Tadici 3 / Spoase 3 Haine	Addid Hambel	Oction	Birth	Status	Member	Guardian
0	i								
U	ii								
	iii								
	iv			ipar a					
	V								
			Saving Bank Acco						
11				Name & address	Name & address of the Bank				
				IFS Code	IFS Code				
			BANK ACCOU	NT DETAILS FOR P	PENSION				
	Bank Account details for payment:			Saving Bank Acco	Saving Bank Account No.				
	(Please attach a copy of cancelled cheque/attested copy of first page of bank Pass Book)		Name & address of the Bank						
12								*************	
12				IFS Code		•••••		******	***********
13	Full Postal a	address of c	laimant			*************		***********	

Claimant's signature Name:....

Employer's Signature Designation & Seal of Employer

## Enclosures:

- Death Certificate
- ii) Joint photograph of all the claimantsiii) Date of Birth certificate of children claiming pension
- iv) Scheme Certificate (if applicable)