

THE EMPLOYEES' PROVIDENT FUND ACT No. 15 of 1958  
**Form J**

**NOMINATION**

Employer's Number : .....

Member's Number : .....

No nomination have been made by me at the time I first became a member of the Employees' provident Fund \*/. The nomination of ..... made by me by document of nomination executed on ..... day of ..... having been revoked by me by document of nomination executed on ..... \*/. The nomination of ..... made by me by document of nomination executed on ..... day of ..... having lapsed \*/by virtue of the death of the nominees namely, ..... \*/by reason of the marriage contracted by me subsequent to the execution of the document of nomination, ....., I, ..... presently employed ..... being a member of the Employees' Provident Fund, do here by nominate the person \*/s mentioned in column 1 of the Schedule here to whose relationship to me is as shown in the corresponding entry in column II of the Schedule, to receive in the event of my death the amount standing to my credit in my individual account in the Employees' Provident Fund, in the proportion specified in the corresponding entry in column II of that schedule.

2. The provision of the Employees' Provident Fund Act, No. 15 of 1958 and the regulations made there under relating to nominations were read and understood by me\*/ were read over and explained to me, and I do hereby set my hand, this ..... day of ..... in the presence of the witness whose signature in herein subscribed.

*Thumb mark of Member*

Left

Right



.....  
Signature of Member

(\* Delete whichever is inapplicable.)

I, ..... of ..... do hereby declare that the provisions of the Employees' Provident Fund Act, No. 15 of 1958, and the regulations made there under relating to nominations\*/ were read over and explained to ..... and he, purporting to understand same, set his signature and thumb marks in my presence on this ..... day of .....

.....  
Signature of Witness

Name of Witness : .....

Description and Address of Witness : .....

.....

(\* Delete whichever is inapplicable.)

SCHEDULE

Name of Nominee	Relationship	Proportion of Benefit

(\* Delete whichever is inapplicable.)