



Certified that I have no family as defined in para 2 (vii) of the Employees's Family Pension Scheme 1995 and should I acquire a family hereafter I shall furnish Particulars there on in the above form.

I hereby nominate the following person for receiving the monthly widow 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 and Address of the nominee	Date of Birth	Relationship with member
Karunanthi. A & 4/82 Grandhi Ashram, pudhupalayam, Nallipalayam (po), Namakkal (dt). pin code 637-201	01/07/1979	Father

Date 21/07/2025

*Goutham.K*  
Signature or thumb impression  
of the subscriber

#### CERTIFICATE BY EMPLOYER

Certified that the above declaration and nomination has been signed / thumb impressed before me by Shri / Smt./  
Miss S. Subash employed in my establishment after he/she has  
read the entries / the entries have been read over to him/her by me and got confirmed by him/her.

Date : 01/07/2025

*S. Subash*  
Signature of the employer or other authorised officer of  
the establishment

Name & address of the Factory /Establishment

Place : Coimbatore

Date : 21/07/2025