## Form D

# [See rules 14 & 37(1)]

## FORM OF APPLICATION FOR TEMPORARY ADVANCES AGAINST DEPOSITS IN GENERAL PROVIDENT FUND (KERALA)

1.	Name and Account Number of the	:
	subscriber and the reference number of	
	the Annual Statement received from	
	the Accountant General, indicating	
	Section number & Branch	
2.	Designation and Permanent Employee	:
	Number (PEN)	
3.	Basic pay	:
4.	Amount of advance required	
	(both in figures and words)	•
5.	Purpose of which it is required	
6.	Number if instalments of recovery	:
	proposed	•
7.	Date of complete repayment of the	•
	previous loan	•
8.	Details of advances pending	:
	recovery:	
	(1) number and date of the order	:
	granting previous advance	
	(2) the amount of previous advance	:
	(3) date and drawal of previous	
	advance	:
	(4) balance outstanding	:
9.		
	[sum of items 4 and 8 (4)] and the	
	number and amount of monthly	
	instalments in which the consolidated	
	advance is proposed to be repaid	
10	Nome of the course of the horizont is	:
10	. Name of treasury at which payment is	

desired

11. I hereby declare that the above statements are true and that I agree to abide by the General Provident Fund (Kerala) Rules in force. I also promise to repay the above advance in equal monthly instalments according to Rules.

Place.....Signature of the subscriberwith name and designation

Date.....

12. Enquiry Certificate

Signature of Head of Department or Office

Place.....

Date.....

#### VERIFICATION REPORT

13. Total amount at the credit of the applicant
14. Amount of advance admissible
15. Number of instalments of repayments
16. Any other fact requiring consideration

(Head of Office or Department)

# Form E

# [See rules 14, 20 & 37 (1)]

# STATEMENT OF DEPOSITS AND WITHDRAWALS FOR THE PERIOD AFTER THE LASTCREDIT CARD TILL THE DATE OF APPLICATION

# FOR.....

## FROM GPF ACCOUNT

Name of Subscriber......G P F Account No.

### A. Deposits

Posito	1	r					1	1	
SI.No.	Month &Year	Monthly subscription	Refund of Advance	Total amount deducted from the month (3+4)	Date of encashment of the bill	Gross amount of the Bill	Net amount of the bill	Name of Treasury	Remarks
1	2	3	4	5	6	7	8	9	10
	March								
	April								
	May								
	June								
	July								
	August								
	September								
	October								
	November								
	December								
	January								
	February								
	Total								
	March								
	April								
	May								
	June								
	July								
	August								
	September								
	October								
	November								
	December								
	January								
	February								
	Total								

1	SI. No.
2	No. and Date of G.O as per which the DA arrears was credited to PF
3	Period to which arrears relate
4	Amount credited to GPF `
5	Date of encashment of the bill
6	Gross amount of the bill `
7	Net amount of the bill
8	Name of Treasury

#### B. Details of DA Credited to GPF since Last Credit Card

#### C. Details of withdrawals made after the Last Credit Card

No. and date of sanction	Date of drawal	Amount	Name of Treasury	Nature of advance TA or NRW	Purpose
1	2	3	4	5	6
Total					

If there is no withdrawal since the Last Credit that fact should be specifically stated in the proforma.

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#### **D.** Abstract

- 1. Total amount at credit as per last credit card for the year 20..... `
- 2. Total amount credited to PF account after last credit card (Total of A&B above)

3.	Grand Total (items 1+2 above)	`
4.	Total amount of advance drawn after the issuance of the last	
	Credit card (Vide details furnished under C above).	`
5.	Total amount of DA arrears and Pay Revision arrears if any	
	not due for withdrawal as per existing Government Orders	`
6.	Grand total (item 4+5) above	`
7.	Net balance at credit of the subscriber (3-6) on the date of application	`

Certified that the particulars furnished above have been verified with reference to pay abstract, acquittance roll, PF Pass Book and other connected records and found correct.

> Signature of Drawing and Disbursing Officer/Signature of subscriber in the case of Gazetted Officer

Place:

Name:

Date:

Designation: