

FORM I

(See rule 26)

FORM OF APPLICATION FOR CONVERSION OF AN ADVANCE INTO A NON-REFUNDABLE WITHDRAWAL

1. Name of the subscriber :
2. Designation and Office to which attached :
3. Pay and Permanent Employee Number (PEN) :
4. Name of the Provident Fund and Account Number : GPF Kerala
5. Balance at credit on the date of application :
6. Balance outstanding to be converted in to a non-refundable withdrawal :
7. (a) Purpose for which advance taken :

(b) Date of payment of advance :

(c) Amount of advance sanctioned :
8. Particulars of communication under which Advance was sanctioned :
9. Whether any advance or non-refundable withdrawal has been drawn previously for the purpose mentioned above, If so, particulars thereof :
10. (a) Total service, including broken periods, if any, on the date of this application :
(b) Period of service left on the date of application for attaining the age of superannuation :
(c) The date of superannuation :

Place:

Date:

Signature of the applicant

Dated:

The above have been verified and found correct.

Signature and Designation of Recommending Authority

FORM E

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

STATEMENT OF DEPOSITS AND WITHDRAWALS FOR THE PERIOD AFTER THE LAST CREDIT CARD TILL THE DATE OF APPLICATION

FOR: NRA Conversion

FROM: GPF ACCOUNT

Name of Subscriber:

G P F Account No:

A. Deposits

| Month & Year | Monthly Subscri- ption | Refund of Advance | Total Amount | Date of Encashment | Gross Amount | Net Amount | Name of Treasury |
|-----------------|------------------------------|----------------------|-----------------|-----------------------|-----------------|---------------|------------------|
| Mar-24 | | | | | | | |
| Apr-24 | | | | | | | |
| May-24 | | | | | | | |
| Jun-24 | | | | | | | |
| Jul-24 | | | | | | | |
| Aug-24 | | | | | | | |
| Sep-24 | | | | | | | |
| Oct-24 | | | | | | | |
| Nov-24 | | | | | | | |
| Dec-24 | | | | | | | |
| Jan-25 | | | | | | | |
| Feb-25 | | | | | | | |
| Mar-25 | | | | | | | |
| Apr-25 | | | | | | | |
| May-25 | | | | | | | |
| Jun-25 | | | | | | | |
| Jul-25 | | | | | | | |
| Aug-25 | | | | | | | |
| Sep-25 | | | | | | | |
| Oct-25 | | | | | | | |
| Nov-25 | | | | | | | |
| Dec-25 | | | | | | | |
| TOTAL | | | | | | | |

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

| Sl. No. | No. and date of GO as per which the D.A. arrears was credited to PF | Period to which arrears related | Amount credited to GPF | Date of encashment of the bill | Gross amount of the bill | Net amount of the bill | Name of Treasury |
|--------------|---|---------------------------------|------------------------|--------------------------------|--------------------------|------------------------|------------------|
| 1 | | | | | | | |
| 2 | | | | | | | |
| 3 | | | | | | | |
| 4 | | | | | | | |
| TOTAL | | | | | | | |

C. Details of withdrawals made after the Last Credit Card

| Sl. No. | No. and date of sanction | Date of drawal | Amount | Name of Treasury | Nature of advance TA/NRA | Purpose |
|--------------|--------------------------|----------------|--------|------------------|--------------------------|---------|
| 1 | | | | | TA | |
| 2 | | | | | TA | |
| 3 | | | | | TA | |
| 4 | | | | | TA | |
| TOTAL | | | | | | |

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

D. Abstract

1. Total amount at credit as per last credit card for the year 2023-24
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 D.A arrears and Pay revision arrears if any not due for withdrawal
as per existing Government Orders
6. Grand Total of items 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 :
Date :

Name :
Designation :