FORM C

APPLICATION FOR NON-REFUNDABLE WITHDRAWAL FROM GENERAL PROVIDENT FUND

(Not applicable to Officers of All India Services)

Bill No ___________________________ Date _____________

Major Head Major Head 8009 State Provident Fund

01 Civil – 101 – General Provident Fund – Temporary Advance from GPF

1. Name of Subscriber:
2. Designation:
3. Office: Department:
4. Account No:
5. Basic Pay: Rs. ________________ Only
   (Rupees _________) only
6. (a) Date of Appointment: ________________
   (b) Date of Superannuation: ________________
7. Amount of advance/ outstanding if any, and the purpose for which advance was taken by then:
   Advance taken Rs. ________________
   (Rupees _________) only.
8. Amount of withdrawal required Rs. ________________ only.
   (Rupees _________) only.
9. (a) Purpose for which the withdrawal is required:
   (b) Rule under which the request is covered:

10. (a) If the withdrawal is sought for House Building/repairs etc. the following information may be given;
    (i) Location and measurement of the plot of house;
    (ii) Estimate cost of purchase/construction repairs;
    (b) If the withdrawal is required for education of children the following information may be give:
    (i) Name of the son/daughter;
    (ii) Name of the institution/ College where studying:
    (iii) Name of the course: Class:
    (c) If the withdrawal is required for medical treatment the following information may be given;
    (i) Name of the patient and relation:
    (ii) Name of the Hospital/Doctor where the patient is undergoing treatment;

1. Whether any withdrawal was taken for the same purpose earlier. If so, indicate the amount and the Year: ________________

Signature of the Applicant
Date __________________________

Certified that the subscriber has the following balance at his credit as on _____________ 2007

(i) Closing balance at the end of previous financial year 2007 Rs. ________________ only.
   Rupees (______________) only.
(ii) Advance/Withdrawal during the year _____________ Rs. ________________ only
   (iii) Credit from. April 200 __ to March’ _____________ Rs. ________________ only
   (iv) Net balance at credit Rs. ________________ only Rupees (______________) Only.

Signature with date
Drawing and Disbursing Officer
Signature with date
Head of the Department
Seal with Code No. 
Sanctioned vide file No. ___________________________ dated ___________________________
FOR THE USE IN GENERAL PROVIDENT FUND SECTION OF FINANCE REVENUE AND EXPENDITURE DEPARTMENT

B.R.NO. ________________

Date ________________

Certified that the above mentioned details are correct and Rs. __________________ Only (Rupees ______________________ only ) is passed for payment

Signature of Ledger keeper (Level I)

Entered in Expdt. Register Page No ________________ (Non-Refundable.)

Pay Rs. __________________ Only Rupees (______________________________)

______________________________ only.

Signature of Sr. Accountant (Level II)

Signature and Designation of D & DO. (Level III)

Cheque No ________________

Date ________________

Voucher No. ________________

Date ________________

Signature of Cheque Writer (Level IV)

Signature and Designation of D & DO. (Level V)