

ANNEXURE-1

FORM-3

Rule 4A(2)

Office of the

Head of account to which Pay &
Allowances are debited

Statement of particulars for allotment of General Provident Fund Account Number to compulsory Subscribers for the month of
.....

Sl.No.	Name of Govt. Servant (Full name in Capital Letters)	Name of Subscriber's father/husband	Date of birth of Subscriber	Date of joining in service	Designation	Emoluments	Monthly rate of Subscription (in whole Rupee)	Month from which subscription to commence	Remarks	To be filled by Pr.A.G's office.
i	ii	iii	iv	v	vi	vii	viii	ix	x	xi
1										
2										
3										

CERTIFICATES

I Certified that all the employees whose names are shown above are eligible to Subscribe to the Provident Fund in accordance with the relevant Rules.

II. Certified that the above mentioned particulars are verified from the Service Book of the respective official and found correct.

Counter Signature & Seal
Inspector of Higher Education

Signature & Seal
Head of Office.

No..... Dated.....

Forwarded in duplicate to the office of the Pr. Accountant General (A&E) Assam for necessary action. The Government servants whose names are included in the Statements are required to join the General Provident Fund under the GPF(AS) (Amendment) Rules,1994 of Government.

Signature & Seal

