

CENTRE FOR DNA FINGERPRINTING AND DIAGNOSTICS

Application for Advance / Withdrawal from CPF

1. Name of the subscriber :
2. Account Number :
3. Designation :
4. Pay :
5. Balance at credit of the Subscriber
on the date of application as below
 - a) Closing balance as per statement
for the year.....
 - b) Credit fromto..... ₹
on account of monthly subscription
 - c) Refunds ₹
 - d) Withdrawals during the period
fromto..... ₹
 - e) Net balance at credit ₹

6. Amount of advance/outstanding, if any, and
the purpose for which advance was taken by
them.

Amount of advance taken
₹

Balance outstanding
as on date ₹

7. Amount of advance/withdrawal required ₹
8. Purpose for which the advance/withdrawal is required

Contd....2

9. Amount of the consolidated advance and number of monthly installments in which the consolidated advance is proposed to be paid

10. Full particulars of the pecuniary circumstances of the subscriber, justifying the application for the advance.

I certify that particulars given above are correct and complete to the best of my knowledge and belief and that nothing has been concealed by me.

Signature of Applicant

Name

Designation

Section/Branch

Date: