Letter No		Date:
(Revised For	rm 5/10) / Joint Declarat	ion Form
To The Regional P F Commissioner EPFO,		
Sub: Correction of the member deta	ails / Joint declaration by the member a	nd the employer in respect of
Sh. / Smt	having PF A/c No:	&
UAN No:		
Dear Sir,  This is to inform you that not correct in respect of the mer	the member details as available on mber mentioned above :-	EPFO Member Portal are
Particulars / Data Description	Data as per EPFO Office / Portal	Corrected data of the Member
Name of the Member		
Date of Birth (DD/MM/YYYY)		
Father's / Husband's Name		
Date of Joining (DD/MM/YYYY)		
Date of leaving (DD/MM/YYYY)		
Gender		
PF/ EPS Account No.		
<b>Documentary Evidence</b>	lence in respect of	are enclosed
1. 2.		
3.		
It is requested that the member regard will be highly appreciated	data may be corrected accordingly.  I.	An early action in this
Yours Faithfully,		
Signature and Name of Member		
(Signatory and Name of Authorized With Establishment Seal)	Signatory	