

**ANNEXURE - III**  
**FORM OF DECLARATION**

Final Payment of the accumulation in my General Provident Fund Account No. .... having been agreed to be authorized in my favour, I ..... do hereby declare that I clearly understand that the payment is strictly provisional and is subject to revision when any discrepancy in my General Provident Fund Account is detected at a later stage and I further promise that if upon such revision the provisional payment made to me has been in excess of the amount actually found admissible. I agree to repay the excess payment in lump failing which I agree that the amount may be recovered from me under the provisions of the Revenue Recovery Act for the time being in force.

Place:

Date :

Signature  
Name and Designation

Address and Occupation of the Witnesses:-

Signature :

Signature :

*(Note : - The witnesses should be Govt. Employees in Service)*