## Letter of Indemnity

I,	a member of the Employees' Provident
Evend and ha	(Full Name)  Ider of National Identity Card Noresiding at
	do hereby declare that I was
	(Address)
employed as	a at
from	to that the said institution is not
in operation now and that the whereabouts of the employer are not known nor traceable.	
	clare that during the period, I served at the said
behalf under	membership number, that all contributions  (With employer No.)
relating my	membership number mentioned above have been deposited in the Central Bank of
Sri Lanka in	the name of
the person kn	nown also by the said name(Full Name)
I do hereby unconditionally agree that in the event of it being established that some other person	
by the said name	
	or the said person's Employees' Provident Fund Membership number was
(Employer Name)	
benefit proceeds awarded to me on so doing, I also agree unconditionally to pay interest on the proceeds drawn up to the date of the refund as determined and estimated by the Central Bank of Sri Lanka.	
Signed on thi	isTwo Thousand
	Signature
We certify that	at the above signature was placed in our presence.
Witness: (1)	Signature:
	Name:
	N.I.C. No.:
	Address:
(2)	Signature:
	Name:
	N.I.C. No.:
	Address: