

[Your Name]
[Your Address]
[City, State, Zip Code]
[Email Address]
[Phone Number]
[Date]

The Manager

[Company/Organization Name]
[Company Address]
[City, State, Zip Code]

Subject: Authorization for PF Contribution

Dear [Manager's Name],

I, [Your Name], an employee of [Company Name] holding the position of [Your Position], hereby authorize the deduction of my Provident Fund (PF) contributions from my monthly salary as per the prevailing PF policy.

My PF account details are as follows:

- PF Account Number: [Your PF Account Number]
- UAN (Universal Account Number): [Your UAN Number]

Please ensure that the contributions are deposited regularly to my PF account as per the statutory requirements.

Thank you for your attention to this matter.

Sincerely,

[Your Signature (if sending a hard copy)]

[Your Printed Name]

[Your Employee ID (if applicable)]