

Request For Changes Or Correction in PAN Data
[For an Individual]

Permanent Account Number (PAN)

I Y Z P S 4 4 9 6 B

Aadhaar Number

7 9 4 3 4 4 7 8 5 6 4 0

Sr. No.

Tick Box

PART A - Personal Information

1. ☒ A. Name

First Name

K R I S H N A M U R T H Y

Middle Name

Last Name

S H A S H I K A L A

☒ B. Name (as per Aadhaar)

K S H A S H I K A L A

2. ☐ Gender (select one)☐

Male

☒

Female

☐

Transgender

3. ☒ Date of Birth

0

6

0

4

1

9

9

5

4. ☒ Address☒

Residence

☐

Office

(select one)

Flat/Door/Building

C / O : M A N J U N A T H A

Road/Street/Block/Sector

B A N A V A R A H O B L I A R S I K E R E T

Post Office

S A L A P U R A

Area/Locality/Town/City

S A L A P U R A

District

H A S S A N

State/Union Territory

KARNATAKA

Country/Region

INDIA

PIN / ZIP CODE

5 7 3 1 1 2

5. ☐ Passport Number6. ☐ Taxpayer Identification Number in the Country of Residence7. ☒ Contact Details

(i) Mobile Number

Country Code

9

1

Mobile Number

8

7

2

2

1

3

1

7

4

1

(ii) Email ID

ganesh123bvr@gmail.com

(iii) Landline No. with Country/ISD Code
and Area/STD Code (if any)

Country/ISD Code

Area/STD Code

Landline Number

PART B - Details of Parents

8. ☐ Father's First Name

K R I S H N A

Father's Middle Name

Father's Last Name

M U R T H Y

9. ☐ Mother's First Name

Mother's Middle Name

Mother's Last Name

R A T H N A M M A

10. Name of parent to be printed on Permanent Account Number card (select one)

☒

Father

☐

Mother

Part C: Declaration by Applicant or by Representative Assessee on behalf of the Applicant

11. Documents submitted as Proof of Identity, Proof of Address, Proof of Date of Birth of the Applicant & Proof of Change in support of proposed changes / corrections requested by the Applicant



(i) Proof of Identity



(ii) Proof of Address



(iii) Proof of Date of Birth



(iv) Documentay proof in support of other changes



(v) Copy of PAN

Verification & Declaration

a. I, ...**KRISHNAMURTHY SHASHIKALA**....., in the capacity of**SELF**.....(Self/Representative Assessee) do hereby declare that what is stated above is true to the best of my knowledge and belief.

Place.....**HASSAN**

Date.....**18/08/2026**



(Signature /Left Hand Thumb Impression of Applicant or Representative Assessee)

ಭಾರತ ಸರ್ಕಾರ
Government of India

ಕೆ ಕಶಿಕಲಾ
K Shashikala
ಜನ್ಮ ದಿನಾಂಕ / DOB : 06/04/1995
ಸ್ತ್ರೀ / Female

Issue Date : 29/06/2013

7943 4478 5640

ನನ್ನ ಆಧಾರ್, ನನ್ನ ಗುರುತು



ಭಾರತೀಯ ವಿಕಿತ್ಯ ಗುರುತು ಪ್ರಾಧಿಕಾರ

Unique Identification Authority of India



ವಿಳಾಸ: ಕೆ.ಆರ್. ಆರ್. ಮಂಜುನಾಥ, ಬಾಣಾವರ
ಹೊಬ್ಬಳಿ ಅರಸೀಕೆರೆ ತಾಲ್ಲೂಕು, ಸಾಲಾಪುರ, ಹಾಸನ,
ಕರ್ನಾಟಕ, 573112

Print Date : 12/02/2021
Address: C/O: Manjunatha, Banavara
Hobli Arsikere Taluk, Salapura, Hassan,
Karnataka, 573112



7943 4478 5640



1947



help@uidai.gov.in



www.uidai.gov.in



ಭಾರತ ಚುನಾವಣಾ ಆಯೋಗ

ELECTION COMMISSION OF INDIA



RGE5761341



ಹೆಸರು: ಕ ಶಶಿಕಲಾ

Name: K Shashikala

ಗಂಡನ ಹೆಸರು: ಮಂಜುನಾಥ

Husband's Name: Manjunatha

ಲಿಂಗ / Gender: ಸ್ತ್ರೀ / Female

ಜನ್ಮ ದಿನಾಂಕ / ವಯಸ್ಸು

Date of Birth / Age: 06-04-1995



e-Electors Photo Identity Card - ಇ-ಮತದಾರ ಭಾವಚಿತ್ರವಿರುವ ಗುರುತಿನ ಚೀಲ



ವಿಳಾಸ: ೦೦, ಸಾಲಪುರ, ಸಾಲಪುರ, ಅರಸೀಕೆರೆ, ಹಾಸನ,
ಕರ್ನಾಟಕ - 573112

Address: 00, SALAPURA, SALAPURA,
ARASIKERE, HASSAN, KARNATAKA -
573112

ಮತದಾರರ ನೋಂದಣಾಧಿಕಾರಿ, 194 - ಅರಸೀಕೆರೆ
Electoral Registration Officer, 194 - Arasikere
Download Date :- 21-03-2024

RGE5761341



1800-4255-1950



<https://ees.karnataka.gov.in/en>

आयकर विभाग
INCOME TAX DEPARTMENT



भारत सरकार
GOVT. OF INDIA



स्थायी लेखा संख्या कार्ड
Permanent Account Number Card

IYZPS4496B



नाम/ Name
SHASHIKALA K

पिता का नाम/ Father's Name
KRISHNA MURTHY

जन्म की तारीख/ Date of Birth
06/06/1995

हस्ताक्षर/ Signature
Shashikala K



23092017