FORM H

[See – Rule 12A]

REPORT FOR THE MONTH OF MARCH/JUNE/SEPTEMBER/DECEMBER.....

1.	Name of Establishment/Employer	
2.	Address	
	Town Dis	trict
	State	

- 3. Type of the establishment
- 4. No. of days worked during the month
- 5. Normal working hours.
- 6. Rest interval (hours)
- 7. *Employment and Earnings of paid employees.

	No. in employment at the end of the month	No. of man days worked during the month	Emoluments paid in cash before deduction	Money value of concession	Ex-gratia cash payments	Contribution to social security funds
(1)	(2)	(3)	(4)	(5)	(6)	(7)
Men						
Women						
Young Persons						

8. No. of unpaid employees.

N.B. - Ex-gratia cash payments include profit sharing bonus as may be paid annually, quarterly or over any other period and other adhoc cash payments, if any.

- *Whether the establishment is a
- (i) shop,
- (ii) commercial establishment,
- (iii) restaurant, eating house or hotel,
- (iv) theatre or a place of public entertainment or
- (v) other type, should be mentioned here.