

Form H

See Rule 13

Quarterly Return

For the month of March/June/September/December -----

1. Name of Establishment -----
Address ----- Town ----- District -----
2. Type of the establishment-----
3. No. of the establishment -----
4. Normal working hours.- -----
5. Rest interval (hours) -----
6. Employment and Earnings of paid employees.-----
7. No of unpaid 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

* Mention the establishment (i) for shop, (ii) for Commercial establishments, (iii) for restaurant, eating house or hotel, and (iv) for theater or place a of public entertainment or (v) other type, should be mentioned here.

Men -----

Women -----

Young person -----

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