

**FORM I**

[See Rule 10]

To  
The Inspector,  
(Under The Maternity Benefit Act, 1961)

I,----- (name), a person nominated under section 6 by or a legal representative of -----  
(name of woman) employed in -----(name and full address of mine or circus) have to complain  
that the said woman having fulfilled the conditions laid down in the Maternity Benefit Act, 1961 and  
the Rules there under is entitled to Rs-----being maternity benefit and/or Rs----- being the  
medical bonus and/ or Rs ----- being wages for leave due under 2[section 9 or 9A] or 10 but  
the same has been improperly withheld by the employer. He may, therefore, be directed to pay the  
amount to me.

Signature or thumb impression of the  
nominee/ legal representative

Date-----

Signature of an Attestor in case the nominee/legal  
representative is unable to sign and affixes thumb sign impression.  
Full address of the nominee/legal representative.

Date -----