FORM - XXIII REGISTER OF WAGES

(Vide Rule 29 (2) of A.P Shops & Establishment Rules, 1990)

Name of the Establishment / Shop: **Registration No.**

Address Of the Establishment: **Wage period** **From** _____To:_____.

S.No	Name of the Employees	Date of Appointment	Rate of Wages	Normal Wages Earned	Wages Earned	Wages Earned for Over Time	Gross wages Payble	Deductions if any , and reasions thereof		Acctual wages paid	Date of Payment	Signature or thumb impression of The Employee	Remarks
								Amount	Reason				
1													
2													
3													
4													
5													
6													
7													
8													
9													
10													
11													
12													
13													