## **FORM U**

See Rule 40

## **Register of Overtime Work**

Name of shop/establishment, if any
Name shop-keeper/employer
Address_
Registration No

For (Here insert the month and year to which it relates).

SI. No.	Name of persons employed	Dates of which overtime work is done	Extent of overtime work on each such date	Total of overtime work done during the month
1.				
2.				
3.				
4.				

Signature of employer/shop-keeper.