

**FORM – T**  
**Wage Slip/Leave Card**  
**[See sub-rule (6) of Rule 11]**

1. Name and address of the establishment									
2. Name of the person employed									
3. Father/Husband's Name									
4. Designation									
5. Date of entry into service									
6. Wage period		From:				To:			
7. Wage Earned		Deductions:							
(a) Basic:		(i) Employees Provident Fund							
(b) Dearness Allowance		(ii) Employee State Insurance							
(c) House Rent Allowance		(iii) Other Deductions							
(d) Overtime Wages									
(e) Leave Wages									
(f) Other Allowances									
(g) Gross Wages		Net Amount Paid							
Leave Availed during the month		CL		SL		EL		M	
Leave at Credit		CL		SL		EL		M	

Signature of the Employer/Manager/  
or any other Authorised Person

Signature or Thumb Impression  
of the person Employed