

STATEMENT SHOWING THE PARTICULARS OF THE EMPLOYEES EMPLOYED IN SHOP/ESTABLISHMENT

Sl. No.	Name of the Employee with Father's Name	Age	Residential Address	Date of Appointment	Designation	Minimum wages to be paid per month	Wages Paid			Signature of the Employee	Remarks
							Basic	V.D.A.	Total		
1		3	4	5	6	7	8	9	10	11	12
1.	S. Sumanth w/o Siv-Burad	26	Arilawa	1/2 yr	Sales gnd	8136=00		8000-		S. Sumanth	

Signature of the Employer / Manager
of the Shop / Establishment

Signature of the Inspecting Officer and Designation
Asst. Labour Officer - IV
V.S.P.