

FORM 5-A

EMPLOYEES' STATE INSURANCE CORPORATION

(Regulation 31-Second Proviso)

**STATEMENT OF ADVANCE PAYMENT OF CONTRIBUTIONS MADE FOR THE
CONTRIBUTION PERIOD ENDED**

Total contribution amounting to Rs. comprising of Rs. as employers' share and Rs. as employees' share paid as under :—

<i>Sl.No.</i>	<i>Details of Advance Payment</i>	<i>Amount</i>	<i>Details of actual contribution paid</i>	<i>Amount</i>	<i>Balance</i>
1	2	3	4	5	6
		Rs. P		Rs. P	Rs. P
1.	Opening Balance				
2.	Challan Dated .....	.....	*April / October	.....	.....
3.	Challan Dated .....	.....	*May / November	.....	.....
4.	Challan Dated .....	.....	*June / December	.....	.....
5.	Challan Dated .....	.....	*July / January	.....	.....
6.	Challan Dated .....	.....	*August / February	.....	.....
7.	Challan Dated .....	.....	*September / March	.....	.....
	Total (i) .....	.....	Total (ii)	.....
			Total due for contribution period		
			Total amount paid in Advance		
			Balance		

Total (ii) should not be less than
Total (i) at any time.

*Strike out which is not applicable

Place

Date

Signature

Designation