

**FORM B
FORMAT FOR WAGE REGISTER**

Rate Of Minimum Wages and since the Date

	HIGHLY SKILLED	SKILLED	SEMI-SKILLED	UN SKILLED
Minimum Basic		16450	15025	-
DA		1054	1054	-
Overtime		0	-	-

Name of the Establishment |

Name Of Owner :

Wages Period Form

(Monthly/Fortnightly/Weekly/Daily/Piece Rated)

Sl. No. in Employee Register	Name	Rate Of Wages	No. of Days Worked	Overtime hours Worked	Basic	Special Basic	DA	Payments Overtime	HRA	Others	Gross Total	PF	ESIC	Income/Profession Tax	Insurance	Others	Recoveries/Advance	Total Deduction	OTHER	Diwali Appraisal	Net Payment	Employee Share PF Welfare Found	Receipt by Employee/Bank Transaction ID	Date Of Payment	Remarks															
1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	17	18	19	20	21	22	23	24	25	26															
MLWF																																								
TOTAL					0				0	0	0	0	0		0			0			0																			