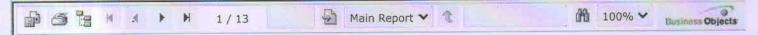


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FORM 5

RETURN OF CONTRIBUTIONS EMPLOYEES' STATE INSURANCE CORPORATION

(Regulation 26)

Name of Branch Office: BO - CHINCHWAD

Employer's Code

Name and Address of the factory or establishment :R. B. ENGINEERING WORKS - PLOT MO. 122/1, SHOP NO. 12,, D G COMI TELCO - CHIKHALI ROAD, CHINCHWAD

Particulars of the Principal employer(s)

(a) Name : BRIJESH LALCHAND PRAJAPATI

(b) Designation: Proprietor

(c) Residential Address: RL 102, YASHODEEP RESIDENCY, TELCO CHIKHALI ROAD, SHAHUNAGAR, CHINCHWAD PUNE

Contribution Period from : Apr 2022 to Sep 2022

I furnish below the details of the Employer's and Employee's share of contribution in respect of the under mentioned insured persons. includes each and every employee, employed directly or through an immediate employer or in connection with the work of the factor work......connected with the administration of the factory / establishment or purchase of raw materials, sale or distril whom the ESI Act, 1948 applies, in the contribution period to which this return relates and that the contributions in respect of employ share have been correctly paid in accordance with the provisions of the Act and Regulations.

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Employees's Share	36,512.00	
Employer's Share	157,481.00	
Total Contribution	193,993.00	

S.No.	Month	Challan Number	Date of Challan	Am
1	Apr-2022	03322117311198	5/13/2022	24585.00
2	May-2022	03322121457442	6/15/2022	26877.00
3	Jun-2022	03322125471510	7/16/2022	30703.00
4	jul-2022	03322129438405	8/19/2022	33872.00
5	Aug-2022	03322132952714	9/17/2022	37221.00
6	Sep-2022	03322136762919	10/15/2022	40735.00

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