**FORM V**

**[See rule 52]**

**WAGE SLIP**

Date of issue:

Name of the Establishment………………………. Address…..………………..….. Period……………..

1. Name of employee **:**

2. Father’s /Spouse name **:**

3. Designation **:**

4. UAN**:**

5. Bank Account No.**:**

6. Wage period**:**

7. Rate of wages payable: a.) Basic b.)D.A. c.) other allowances

8. Total attendance/unit of work done:

9. Overtime wages:

10. Gross wages payable :

11. Total deductions : a.) PF b). ESI c.) Others

12. Net wages paid:

Employer / Pay-in-charge signature