

## FORM 12-A (REVISED)

FOR UNEXEMPTED ESTABLISHMENT ONLY  
 EMPLOYEES' PROVIDENT FUND & MISC. PROVS. ACT, 1952  
 EMPLOYEES' PENSION SCHEME, 1995 (PARA 20)  
 EMPLOYEES' DEPOSIT LINKED INSURANCE SCHEME, 1976

Name and Address

**CURRENCY PERIOD :**

**FOR THE MONTH OF**

ESTABLISHMENT STATUS : UNEXEMPTED

CODE NO. :

GROUP :

STATUTORY RATE OF CONTRIBUTION : @12%

PARTICULARS	WAGES ON WHICH CONTRIBUTIONS ARE PAYABLE	AMOUNT OF CONTRIBUTION		AMOUNT OF CONTRIBUTION REMITTED		AMT. OF ADMN. CHARGES PAYABLE	AMT. OF ADMN. CHARGES REMITTED	DATE OF REMITTANCES (TRIPLICATE COPY OF CHALLAN ENCLOSED)
		RECOVERED FROM THE EMPLOYEES'	PAYABLE BY THE EMPLOYER	EMPLOYEES' SHARE	EMPLOYERS' SHARE			
EPF A/c I								
PENSION FUND A/c X				0		0	0	
EDLI A/c XXI		0		0				

TOTAL NUMBER OF EMPLOYEES :

NAME & ADDRESS OF THE BANK STATE BANK OF INDIA  
 IN WHICH THE AMOUNT IS REMITTED MUMBAI -  
 RECEIVED TRIPLICATE COPY OF CHALLAN ENCLOSED

(A) CONTRACT	NIL
(B) REST	
(C) TOTAL	

	E.P.F.	PENSION FUND	E. D. L. I.
No. of Subscribers as per Last Month			
No. of Subscribers (Vide Form No. 5)			
No. of Subscribers left services (vide Form 10)			