## **Employees Provident Fund Scheme Form 4**

(Paragraphs 35 and 42 of the Employees' Provident Funds Scheme, 1952)

## Contribution card for employees other than monthly paid employees for the period\_\_\_\_from to\_\_\_\_

1.	Account No							
2.	Name (in block	ame (in block capitals)Surname		_Surname				
3.	Caste							
4.	Sex							
5.	Date of birth as given in Form 2							
6.	Occupation							
7.	Father's name							
8.	Husband's name							
	(for married wor							
9.	Martial status _							
(whether bachelor, spinster, married, widow or widower)								
10.	Permanent Address							
	VillageThana							
	Taluk/Sub-Divis	ion		District				
	State							
11.	Signature or left hand thumb impression of member							
12.	Signature of person preparing the card							
13.	Signature of the Manager of the (factory or other establishment)							
14.	Registered Number of the (factory or other establishment)							
15.	Name and address of the (factory or other establishment)							
Particulars of employment								
Registered number of factory or other		Duration of Employment	Remark s	Initials of the employer's authorised clerk				

The employer's and member's contribution should be shown separately for each week		Employer's /member/s total amount refunded		Week 1	Week 2	Week 3	Week 4	Week 5
Week 6	Week 7	Week 8	Week 9	Week	Week	Week	Week	Week
				10	11	12	13	14
Week	Week	Week	Week	Week	Week	Week	Week	Week
15	16	17	18	18	20	21	22	23
Week	Week	Week	Week	Week	Week	Week	Week	Week
24	25	26	27	28	29	30	31	32
Week	Week	Week	Week	Week	Week	Week	Week	Week
33	34	35	36	37	38	39	40	41
Week	Week	Week	Week	Week	Week	Week	Week	Week
42	43	44	45	46	47	48	49	50
Week	Week							
51	52							

Total contribution of	Rs	Signature of the employer's
the employer		Head Clerk or any
		Authorised Clerk
Total contribution by		Checked and found correct
the member		
Grand Total		
Amount refunded		Authorised official of the
		Office of the Commissioner.