



# कर्मचारी राज्य बीमा निगम

## EMPLOYEES' STATE INSURANCE CORPORATION

TRIPPLICATE  
QUADRUPPLICATE  
For Depositor to be attached with Return of Contributions

लेखा संख्या 1 में जमा करवाने के लिए चालान फार्म  
Challan Form for Deposit in A/C No.1

दिनांक Date    महीना Month    वर्ष Year  
[ ] [ ] [ ] [ ] [ ] [ ] [ ] [ ] [ ] [ ] [ ] [ ]

नियोजक कोड Employer's Code: 52 26007 101 बैंक और शाखा कोड\* Bank & Branch Code: [ ] [ ] [ ] [ ] [ ] [ ]

कारखाना/स्थापना का नाम एवं पता  
Name of Factory/Estt. & Address: M/S. MEHTA AND MODI HOMES  
6-4-187/3 & 4, II FLOOR  
SOHAM MANSION, M. G. ROAD,

अदायगी का स्वरूप (प्रयुक्त अदायगी स्वरूप कर (✓) का निशान लगाए)  
Mode of Payment (Tick (✓) mode used)    नकद Cash [ ]    चेक Cheque [ ]    डि. ड्रा D.D. [ ]

चेक/डि. ड्रा. स चेक/डि. ड्रा. नं. 03 6023    दिनांक Dated 21 / 02 / 2008

आहरित (बैंक का नाम)  
Drawn on (Name of the Bank) SBI MG ROAD    अंशदान अवधि Period of Contribution [ ] / [ ] / 2006

अदायगी विवरण (अदायगी के स्वरूप पर (✓) का निशान लगाए)  
Details of Payment (Tick (✓) mode used)    नियमित अंशदान Regular Contribution [ ]    ब्याज Interest [ ]    हानि Damages [ ]    अन्य Others [ ]

कर्मचारियों की संख्या No. of Employees [ ] [ ] [ ] [ ]    कुल मजदूरी Total Wages [ ] [ ] [ ] [ ] [ ] [ ]

कर्मचारी अंशदान Employee's Contribution	रुपये Rs.	पैसे Rs.
नियोजक अंशदान Employer's Contribution		
# ब्याज # Interest	583	00
# हानि # Damages	4692	00
# अन्य # Others		
# योग # Total	5275	00

कुल राशि (शब्दों में) Total amount (in words) FIVE THOUSAND TWO HUNDRED SEVENTY FIVE ONLY

# क्षेत्रीय कार्यालय मांग संख्या व दिनांक # R.O. Demand Letter No. & Date  
52 26007/55023/2008    dated 12-2-2008  
5-2-2008  
हस्ताक्षर Signature: [Signature]  
नाम व पदनाम - प्राधिकृत हस्ताक्षरकर्ता की सील  
Name & Designation - Seal of Authorised Signatory

(जमाकर्ता द्वारा भरा जाए) (to be filled by Depositor)	(पावती) (Acknowledgement)	बैंक के प्रयोग के लिए - For use in Bank
रुपये Received Rs. [ ] [ ] [ ] [ ] [ ] [ ]	रुपये (मान) (Rs. [ ] [ ] [ ] [ ] [ ] [ ] only)	बैंक सूची सं. Bank Scroll No. [ ] [ ] [ ] [ ] [ ] [ ]
नकद/चेक/डि. ड्रा. का दिनांक [ ] [ ] [ ] [ ] [ ] [ ]	करीबी नि लेखा सं. के पक्ष में	दिनांक Date [ ] [ ] [ ] [ ] [ ] [ ]
In Cash/ by Cheque/DD No. [ ] [ ] [ ] [ ] [ ] [ ]	बैंक पर आहरित के द्वारा (नकदीकरण पर) प्राप्त किया।	प्राधिकृत हस्ताक्षर और प्राप्तकर्ता बैंक की सील
Realisation) drawn on (Bank) in favour of ESIC Fund A/C No.1	(subject to)	Authorised signature & seal of the Receiving Bank

\* (बैंक शाखा कोड के लिए पीठ पृष्ठ देखें)    नोट: कृपया खाली खानों में (X) चिह्न लगाए  
(For Bank Branch Code see on reverse)    Note: Please put cross (X) mark in blank boxes

User ID No. 1788178  
SBI 3032 26 FEB 2008  
Cash Paid/Received/Transferred  
M.G. Road Sec'bad  
K. NARAYANA



# कर्मचारी राज्य बीमा निगम

## EMPLOYEES' STATE INSURANCE CORPORATION

QUADRUPPLICATE  
For Depositor to be attached  
with Return of Contributions

QUADRUPPLICATE

लेखा संख्या 1 में जमा करवाने के लिए चालान फार्म  
Challan Form for Deposit in A/C No.1

दिनांक Date    महीना Month    वर्ष Year  
[ ] [ ] [ ] [ ] [ ] [ ] [ ] [ ] [ ] [ ] [ ] [ ]

नियोजक कोड Employer's Code: 52 26007 101 बैंक और शाखा कोड: Bank & Branch Code: [ ] [ ] [ ] [ ] [ ] [ ]

कारखाना/स्थापना का नाम एवं पता Name of Factory/Estt. & Address  
M/S. MEHTA AND MODI HOMES  
5-4-187/3 & 4, II FLOOR,  
SOHAM MANSION, M. G. ROAD,  
SECUNDERABAD - 500 003

अदायगी का स्वरूप (प्रयुक्त अदायगी स्वरूप कर (✓) का निशान लगाए) Mode of Payment (Tick (✓) mode used)  
नकद Cash     चेक Cheque     डि. ड्रा D.D.

चेक/डि. ड्रा. सं Cheque/DD No. 036023    दिनांक Dated 21 02 2008  
महीना Month    वर्ष Year

आहरित (बैंक का नाम) Drawn on (Name of the Bank) SBI MG ROAD    अंशदान अवधि Period of Contribution [ ] [ ] 2006

अदायगी विवरण (अदायगी के स्वरूप पर (✓) का निशान लगाए) Details of Payment (Tick (✓) mode used)  
नियमित अंशदान Regular Contribution     ब्याज Interest     हानि Damages     अन्य Others

कर्मचारियों की संख्या No. of Employees [ ] [ ] [ ] [ ] [ ] [ ]    कुल मजदूरी Total Wages [ ] [ ] [ ] [ ] [ ] [ ] [ ] [ ] [ ] [ ] [ ] [ ]

कर्मचारी अंशदान Employee's Contribution	[ ] [ ] [ ] [ ] [ ] [ ] [ ] [ ] [ ] [ ] [ ] [ ]
नियोजक अंशदान Employer's Contribution	[ ] [ ] [ ] [ ] [ ] [ ] [ ] [ ] [ ] [ ] [ ] [ ]
# ब्याज # Interest	[ ] [ ] [ ] [ ] [ ] [ ] [ ] [ ] [ ] [ ] [ ] [ ]
# हानि # Damages	[ ] [ ] [ ] [ ] [ ] [ ] [ ] [ ] [ ] [ ] [ ] [ ]
# अन्य # Others	[ ] [ ] [ ] [ ] [ ] [ ] [ ] [ ] [ ] [ ] [ ] [ ]
# योग # Total	[ ] [ ] [ ] [ ] [ ] [ ] [ ] [ ] [ ] [ ] [ ] [ ]

कुल राशि (शब्दों में) Total amount (in words) FIVE THOUSAND TWO HUNDRED SEVENTY FIVE ONLY  
# क्षेत्रीय कार्यालय भाग संख्या व दिनांक # R.O. Demand Letter No. & Date For MEHTA & MODI HOMES

From 1-5-2006 To 31-10-2006    52 26007/55023/2008    हस्ताक्षर/Signature  
नाम व पदनाम / Name & Designation: Authorised Signatory    नाम व पदनाम / Name & Designation: Seal of Authorised Signatory

(जमाकर्ता द्वारा भरा जाए) (to be filled by Depositor) रुपये Received Rs. [ ] [ ] [ ] [ ] [ ] [ ] [ ] [ ] [ ] [ ] [ ] [ ] (मात्र (Rs. only) नकद/चेक/डि. ड्रा. सं. In Cash/ by Cheque/DD No. [ ] [ ] [ ] [ ] [ ] [ ] [ ] [ ] [ ] [ ] [ ] [ ] के पक्ष में (Bank) in favour of ESIC Fund A/C No.1	(पावती) (Acknowledgement) बैंक के प्रयोग के लिए For use in Bank बैंक सूची सं. Bank Scroll No. [ ] [ ] [ ] [ ] [ ] [ ] [ ] [ ] [ ] [ ] [ ] [ ] दिनांक Date [ ] [ ] [ ] [ ] [ ] [ ] [ ] [ ] [ ] [ ] [ ] [ ] प्राधिकृत हस्ताक्षर और प्राप्तकर्ता बैंक की सील Authorised signature & seal of the Receiving Bank
---	--

\* (बैंक शाखा कोड के लिए पीठ पढ़ें) (For Bank Branch Code see on reverse)  
नोट: कृपया खाली खानों में (X) चिह्न लगाए। Note: Please put cross (X) mark in blank boxes

User ID No. 7887 M. NARAYANA  
SBI 26 FEB 2008 M.G. Road Sec/bsd  
Cash Paid/Received/Transferred

# ESIC

ORIGINAL (for Bank)  
DUPLICATE (for ESIC through Bank)  
TRIPLICATE (for Depositor)  
QUADRUPPLICATE (through Depositor)

EMPLOYEES STATE INSURANCE FUND ACCOUNT No. 1 Challan No.

PAY-IN-SLIP FOR CONTRIBUTION

STATE BANK OF INDIA  
Station... M.G. ROAD...

Dated: 7-11-2008

Particulars of Cash/Cheque No.	Amount	
	Rs.	P.
SBI CH. No. 850447 6/11/08	5692	00
Total	5692	00

Paid into the credit of the Employees State Insurance Fund Account No. 1

Rs. 5692/-

(Rupees Five thousand Six hundred Ninety two only)

in Cash/by Cheque (on realisation) for payment of contribution as per details given below under the Employees' State Insurance Act, 1948, for the month of OCTOBER-2008

Deposited by Kaniga

Employer's Code No. 52-26007-101  
Name and Address of Factory/Establishment... M/s. MEHTA AND MODI HOMES  
5-4-187, 3 & 4, II FLOOR,  
SOHAM MANSION, M. G. ROAD,  
SECUNDERABAD - 500 003

No. of Employees 17  
Total Wages Rs. 87571 = 00  
Employee's Contribution Rs. 1532 = 00  
Employer's Contribution Rs. 4160 = 00  
Total Rs. 5692 = 00

(For use in Bank)

### ACKNOWLEDGEMENT

(to be filled by depositor)

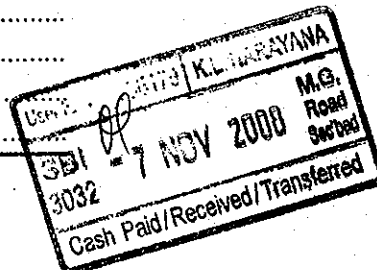
Received payment with Cash/Cheque/Draft No. 3032  
dated 7 NOV 2008 for Rs. 5692/- (Rupees 5692/- only)

drawn on SBI (Bank)

in favour of Employees' State Insurance Fund Account No. 1

Sl. No. in Bank's Scroll

Date : ..... Authorised Signatory of the receiving Bank



# ESIC

ORIGINAL (for Bank)  
 DUPLICATE (for ESIC through Bank)  
 TRIPLICATE (for Depositor)  
 QUADRUPLICATE (through Depositor)

EMPLOYEES STATE INSURANCE FUND ACCOUNT No. 1

Challan No.

PAY-IN-SLIP FOR CONTRIBUTION

STATE BANK OF INDIA

Station: SBI M.G. ROAD

Dated 21-X-2008

Particulars of Cash/Cheque No.	Amount	
	Rs.	P.
<u>SBI Ch No</u> <u>850432</u> <u>18-10-08</u>	<u>6361</u>	<u>00</u>
Total	<u>6361</u>	<u>00</u>

Paid into the credit of the Employees State Insurance Fund Account No. 1

Rs. 6361 = 00

(Rupees SIX THOUSAND THREE HUNDRED - SIXTY ONE only)

in Cash/by Cheque (on realisation) for payment of contribution as per details given below under the Employees' State Insurance Act, 1948, for the month of SEPTEMBER-2008

Deposited by Kanoya

Employer's Code No. 52-26007-101

Name and Address of

M/s. MEHTA AND MODI HOMES

Factory/Establishment

5-4-187.3 & 4, II FLOOR,

SOHAM MANSION, M. G. ROAD,

No. of Employees

18

SECUNDERABAD - 500 003

Total Wages Rs.

97868 = 00

Employee's Contribution Rs.

1713 = 00

Employer's Contribution Rs.

4649 = 00

Total Rs.

6361 = 00

(For use in Bank)

### ACKNOWLEDGEMENT

(to be filled by depositor)

Received payment with Cash/Cheque/Draft No.

dated ..... for Rs. .... (Rupees 6361/- only)

drawn on ..... (Bank)

in favour of Employees' State Insurance Fund Account No. 1

Sl. No. in Bank's Scroll

Date .....

Authorised Signatory of the receiving Bank



# ESIC

ORIGINAL (for Bank)  
DUPLICATE (for ESIC through Bank)  
TRIPLICATE (for Depositor)  
QUADRUPPLICATE (through Depositor)

EMPLOYEES STATE INSURANCE FUND ACCOUNT No. 1

Challan No.

PAY-IN-SLIP FOR CONTRIBUTION

STATE BANK OF INDIA

Station: SBI MARRAD

Dated: 16-9-2008

Particulars of Cash/Cheque No.	Amount	
	Rs.	P.
Ch. No. 110399 13-9-08 SBI MARRAD	5338	00
Total	5338	00

Paid into the credit of the Employees State Insurance Fund Account No. 1

Rs. 5338=00.

(Rupees SIX THOUSAND THREE HUNDRED - THIRTY EIGHT only)

in Cash/by Cheque (on realisation) for payment of contribution as per details given below under the Employees' State Insurance Act, 1948, for the month of AUGUST-2008

Deposited by: [Signature]

Employer's Code No. 52-26007-101 M/s. MEHTA AND MODI HOMES

Name and Address of

6-4-187 3. & 4, II FLOOR,

Factory/Establishment

SOHAM MANSION, M. G. ROAD,  
SECUNDERABAD - 500 003

No. of Employees 18

Total Wages Rs. 97,510 = 00

Employee's Contribution Rs. 1706 = 00

Employer's Contribution Rs. 4632 = 00

Total Rs. 6338 = 00

(For use in Bank)

### ACKNOWLEDGEMENT

(to be filled by depositor)

Received payment with Cash/Cheque/Draft No. ....

dated ..... for Rs. (Rupees) 6338/-

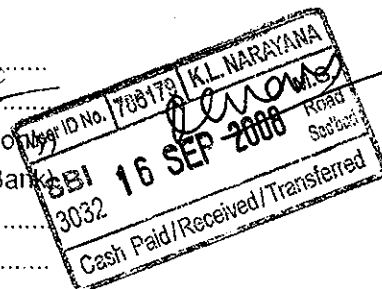
drawn on ..... (Bank) SBI

in favour of Employees' State Insurance Fund Account No. 1

Sl. No. in Bank's Scroll .....

Date .....

Authorised Signatory of the receiving Bank



# ESIC

ORIGINAL (for Bank)  
DUPLICATE (for ESIC through Bank)  
TRIPLICATE (for Depositor)  
QUADRUPPLICATE (through Depositor)

EMPLOYEES STATE INSURANCE FUND ACCOUNT No. **1** Challan No.   
PAY-IN-SLIP FOR CONTRIBUTION

STATE BANK OF INDIA  
Station... M.G. ROAD

Dated... 14-8-2008

Particulars of Cash/Cheque No.	Amount	
	Rs.	P.
Ch-no. SBI 110388 13/8/08	6455	00
Total	6455	00

Paid into the credit of the Employees State Insurance Fund Account No. 1

Rs. 6455 = 00.

(Rupees Six thousand four hundred - Fifty Five 00 only)

in Cash/by Cheque (on realisation) for payment of contribution as per details given below under the Employees' State Insurance Act, 1948, for the month of JULY - 2008

Deposited by [Signature]

Employer's Code No. 52-26007-101 M/s. MEHTA AND MODI HOMES  
Name and Address of Factory/Establishment 5-4-187/3, & 4, II FLOOR, SOHAM MANSION, M. G. ROAD, SEGUNDERABAD - 500 003

No. of Employees 18  
Total Wages Rs. 99305 = 00  
Employee's Contribution Rs. 1738 = 00  
Employer's Contribution Rs. 4717 = 00  
Total Rs. 6455 = 00

(For use in Bank)

### ACKNOWLEDGEMENT

(to be filled by depositor)

Received payment with Cash/Cheque/Draft No. \_\_\_\_\_ dated \_\_\_\_\_ for Rs. \_\_\_\_\_ (Rupees 6455 only)

drawn on \_\_\_\_\_ (Bank)

in favour of Employees' State Insurance Fund Account No. **1**

Sl. No. in Bank's Scroll \_\_\_\_\_

Date : \_\_\_\_\_ Authorised Signatory of the receiving Bank



# ESIC

ORIGINAL (for Bank)  
 DUPLICATE (for ESIC through Bank)  
 TRIPLICATE (for Depositor)  
 QUADRUPPLICATE (through Depositor)

EMPLOYEES STATE INSURANCE FUND ACCOUNT No. 1

Challan No.

PAY-IN-SLIP FOR CONTRIBUTION

STATE BANK OF INDIA

Station... M.G. ROAD - SEC

Dated. 15-7-2008

Particulars of Cash/Cheque No.	Amount	
	Rs.	P.
C.H. No. 110317	5787	00
DT. 12-7-08		
SBI MARGAD		
Total	5787	00

Paid into the credit of the Employees State Insurance Fund Account No. 1

Rs. 5787 = 00

(Rupees... FIVE THOUSAND SEVEN HUNDRED EIGHTY SEVEN 0 only)

in Cash/by Cheque (on realisation) for payment of contribution as per details given below under the Employees' State Insurance Act, 1948, for the month of... JUNE-2008

Deposited by... Kanaiya

Employer's Code No. 52-26007-101  
 Name and Address of Factory/Establishment... M/s. MEHTA AND MODI HOMES  
5-4-187 3 & 4, II FLOOR,  
SOHAM MANSION, M. G. ROAD,  
SECUNDERABAD - 500 003

No. of Employees... 17  
 Total Wages Rs... 89031 = 00  
 Employee's Contribution Rs... 1558 = 00  
 Employer's Contribution Rs... 4229 = 00  
 Total Rs... 5787 = 00

(For use in Bank)

**ACKNOWLEDGEMENT**

(to be filled by depositor)

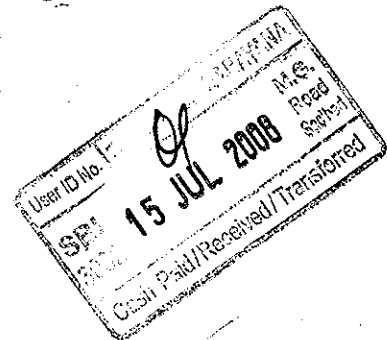
Received payment with Cash/Cheque/Draft No. ....  
 dated... for Rs... (Rupees. 5787 only)

drawn on... (Bank)

in favour of Employees' State Insurance Fund Account No. 1

Sl. No. in Bank's Scroll.....

Date : ..... *Authorised Signatory of the receiving Bank*



# ESIC

ORIGINAL (for Bank)  
DUPLICATE (for ESIC through Bank)  
TRIPLICATE (for Depositor)  
QUADRUPPLICATE (through Depositor)

EMPLOYEES STATE INSURANCE FUND ACCOUNT No. 1

Challan No.

PAY-IN-SLIP FOR CONTRIBUTION

STATE BANK OF INDIA

Station... M.G. ROAD - SEC

Dated... 17/6/2008

Particulars of Cash/Cheque No.	Amount	
	Rs.	P.
<u>CH-No:</u> <u>110302</u> <u>16/6/08</u>	<u>5681</u>	<u>00</u>
<u>SBI Total</u>	<u>5681</u>	<u>00</u>

Paid into the credit of the Employees State Insurance Fund Account No. 1

Rs. 5681=00

(Rupees) FIVE THOUSAND SIX HUNDRED - EIGHTY ONE only)

in Cash/by Cheque (on realisation) for payment of contribution as per details given below under the Employees' State Insurance Act, 1948, for the month of MAY-2008

Deposited by [Signature]

Employer's Code No. 54-2607-101

Name and Address of Factory/Establishment... W/s. MEHTA AND MODI HOME  
5-4-187, 3 & 4, II FLOOR,  
SOHAM MANSION, M. G. ROAD,

No. of Employees... 17 SECUNDERABAD - 500 003

Total Wages Rs. 57373 = 00

Employee's Contribution Rs. 1530 = 00

Employer's Contribution Rs. 4151 = 00

Total Rs. 5681 = 00

(For use in Bank)

### ACKNOWLEDGEMENT

(to be filled by depositor)

Received payment with Cash/Cheque/Draft No. ....

dated... for Rs. .... (Rupees 5681=00)

..... only)

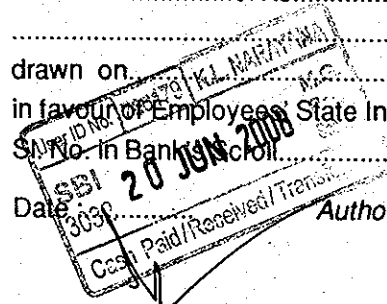
drawn on..... (Bank)

in favour of Employees' State Insurance Fund Account No. 1

.....

Date 20 JUN 2008

..... Authorised Signatory of the receiving Bank





# ESIC

ORIGINAL (for Bank)  
DUPLICATE (for ESIC through Bank)  
TRIPLICATE (for Depositor)  
QUADRUPPLICATE (through Depositor)

EMPLOYEES STATE INSURANCE FUND ACCOUNT No. 1 Challan No.

PAY-IN-SLIP FOR CONTRIBUTION

STATE BANK OF INDIA

Station... M.G. ROAD - SEC

Dated... 15-5-2008

Particulars of Cash/Cheque No.	Amount	
	Rs.	P.
<u>Ch. No.</u> <u>110282</u> <u>13/5/08</u>	<u>5806</u>	<u>00</u>
Total	<u>5806</u>	<u>00</u>

Paid into the credit of the Employees State Insurance Fund Account No. 1

Rs. 5806 = 00

(Rupees... FIVE THOUSAND EIGHT HUNDRED - SIX only)

in Cash/by Cheque (on realisation) for payment of contribution as per details given below under the Employees' State Insurance Act, 1948, for the month of APRIL-2008

Deposited by... [Signature]

Employer's Code No. 52-26007-101

Name and Address of Factory/Establishment... M/s. MEHTA AND MODI HOMES  
5-4-187, 3. & 4, II FLOOR,  
SOHAM MANSION, M. G. ROAD,  
SECUNDERABAD - 500 003

No. of Employees... 17

Total Wages Rs. 89316 = 00

Employee's Contribution Rs. 1563 = 00

Employer's Contribution Rs. 4243 = 00

Total Rs. 5806 = 00

(For use in Bank)

### ACKNOWLEDGEMENT

(to be filled by depositor)

Received payment with Cash/Cheque/Draft No. ....

dated 13/5 for Rs. .... (Rupees 5806 = 00)

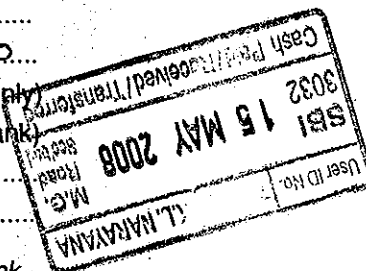
drawn on... (Bank) .....

in favour of Employees' State Insurance Fund Account No. 1

Sl. No. in Bank's Scroll .....

Date : .....

Authorised Signatory of the receiving Bank





कर्मचारी राज्य बीमा निगम  
**EMPLOYEES' STATE INSURANCE CORPORATION**

**TRIPPLICATE**  
**QUADRUPPLICATE**  
 For Depositor to be attached with Return of Contributions

लेखा संख्या 1 में जमा करवाने के लिए चालान फार्म  
**Challan Form for Deposit in A/C No.1**

दिनांक महीना वर्ष  
 Date Month Year  
 21 05 2008

नियोजक कोड Employer's Code 52 26007 101 बैंक और शाखा कोड\* Bank & Branch Code\* 3 032

कारखाना/स्थापना का नाम एवं पता  
 Name of Factory/Estt. & Address  
 M/s. MEHTA AND MODI HOMES  
 8-4-187, 3 & 4, II FLOOR,  
 SOHAM MANSION, M. G. ROAD

अदायगी का स्वरूप (प्रयुक्त अदायगी स्वरूप को (✓) चिह्न लगाएं)  
 Mode of Payment (Tick (✓) mode used)  
 BEUNDERABAD 500 003 बैंक  डि. ड्रा   
 Cash Cheque D.D.

चैक/डि. ड्रा. सं Cheque/DD No. 110288 दिनांक Dated 21 05 2008  
 महीना Month वर्ष Year

आहरित (बैंक का नाम)  
 Drawn on (Name of the Bank) SBI MG ROAD अंशदान अवधि  
 Period of Contribution 2006

अदायगी विवरण (अदायगी के स्वरूप पर (✓) का निशान लगाएं)  
 Details of Payment [Tick (✓) mode used] नियमित अंशदान\*  ब्याज  हानि  अन्य   
 Regular Contribution Interest Damages Others

कर्मचारियों की संख्या No. of Employees कुल मजदूरी Total Wages  
 रुपये Rs. पैसे Ps.

कर्मचारी अंशदान Employee's Contribution									
नियोजक अंशदान Employer's Contribution									
# ब्याज # Interest									
# हानि # Damages									
# अन्य # Others									
# योग # Total								1398	00

कुल राशि (शब्दों में) Total amount (in words) ONE THOUSAND THREE HUNDRED NINETY EIGHT

# क्षेत्रीय कार्यालय मांग संख्या व दिनांक # R.O. Demand Letter No. & Date  
 AP/INS-IV/52-26007-101/14  
 Dt. 25-4-2008  
 PERIOD - MAY-06 to OCT-2006  
**For MEHTA & MODI HOMES**  
 हस्ताक्षर Signature  
 नाम व पदनाम प्राधिकृत हस्ताक्षरकर्ता की सील  
 Name & Designation Seal of Authorised Signatory  
**Authorised Signatory**

(जमाकर्ता द्वारा भरा जाए) (पावती) (Acknowledgement)  
 (to be filled by Depositor)  
 रुपये Received Rs.   
 (मात्र रुपये) (Rs. only)  
 नकद/चैक/डि ड्रा सं दिनांक, क रा बी नि लेखा सं 3  
 के पक्ष में बैंक पर आहरित के द्वारा (नकदीकरण पर) प्राप्त किया।  
 In Cash/ by Cheque/DD No. Dated (subject to Realisation) drawn on (Bank) in favour of ESIC Fund A/C No.1  
 बैंक के प्रयोग के लिए For use in Bank  
 बैंक सूची सं. Bank Scroll No.  
 दिनांक Date  
 प्राधिकृत हस्ताक्षर और प्राप्तकर्ता बैंक की सील  
 Authorised signature & seal of the Recerving Bank

\* (बैंक शाखा कोड के लिए पीठ पृष्ठ देखें)  
 \* (For Bank Branch Code see on reverse)  
 नोट: कृपया खाली खानों में (X) चिह्न लगाएं  
 Note: Please put cross (X) mark in blank boxes

User ID No. 786  
**SBI**  
 3032  
**MAY 2008**  
 M.G. Road Sec'bad  
 Cash Paid/Received/Transferred



# कर्मचारी राज्य बीमा निगम

## EMPLOYEES' STATE INSURANCE CORPORATION

QUADRUPPLICATE ORIGINAL

QUADRUPPLICATE For Depositor to be attached with Return of Contributions

लेखा संख्या 1 में जमा करवाने के लिए चालान फार्म  
Challan Form for Deposit in A/C No.1

दिनांक Date 21 05 2008  
महीना Month वर्ष Year

नियोजक कोड Employer's Code 52 26007 101 बैंक और शाखा कोड\* Bank & Branch Code\* 3 032

कारखान/स्थापना का नाम एवं पता  
Name of Factory/Estt. & Address M/S. MEHTA AND MODI HOMES  
6-4-137, 3 & 4, I FLOOR

अदायगी का स्वरूप (प्रयुक्त अदायगी स्वरूप पर (✓) का निशान लगाए)  
Mode of Payment (Tick (✓) mode used) SOHAM MANSION, M.G. ROAD  
SECUNDERABAD 500 003  
नकद Cash  चेक Cheque  डि. ड्रा D.D.

चेक/डि. ड्रा. सं Cheque/DD No. 110288 दिनांक Dated 21 05 2008  
महीना Month वर्ष Year

आहरित (बैंक का नाम)  
Drawn on (Name of the Bank) SBI MG ROAD अंशदान अवधि Period of Contribution 2006

अदायगी विवरण (अदायगी के स्वरूप पर (✓) का निशान लगाए)  
Details of Payment [Tick (✓) mode used] नियमित अंशदान\* Regular Contribution  ब्याज Interest  हानि Damages  अन्य Others

कर्मचारियों की संख्या No. of Employees	कुल मजदूरी Total Wages		
कर्मचारी अंशदान Employee's Contribution			
नियोजक अंशदान Employer's Contribution			
# ब्याज # Interest			
# हानि # Damages			
# अन्य # Others		1398	00
# योग # Total		1398	00

कुल राशि (शब्दों में) Total amount (in words) ONE THOUSAND THREE HUNDRED NINETY EIGHT

# क्षेत्रीय कार्यालय मांग संख्या व दिनांक # R.O. Demand Letter No. & Date  
AP/INS-IV/52-26007-101/14  
01.05.11.2008  
PERIOD - MAY-06 To OCT-2006  
हस्ताक्षर Signature For MEHTA & MODI HOMES  
नाम व पदनाम - प्राधिकृत हस्ताक्षर की सील  
Name & Designation Authorised Signatory

(जमाकर्ता द्वारा भरा जाए) (पावती) (Acknowledgement)  
(to be filled by Depositor)

रुपये Received Rs.

(मात्र रूपये) (Rs. only)

नकद/चेक/डि ड्रा सं दिनांक, क रा बी नि लेखा सं १ के पक्ष में बैंक पर आहरित के द्वारा (नकदीकरण पर) प्राप्त किया।  
In Cash/ by Cheque/DD No. Dated (subject to Realisation) drawn on (Bank) in favour of ESIC Fund A/C No.1

\* (बैंक शाखा कोड के लिए पीठ पृष्ठ देखें)  
\* (For Bank Branch Code see on reverse)

बैंक के प्रयोग के लिए For use in Bank

बैंक सूची सं. Bank Scroll No.

दिनांक Date

प्राधिकृत हस्ताक्षर और प्राप्तकर्ता बैंक की सील  
Authorised signature & seal of the Receiving Bank

नोट : कृपया खाली खानों में (X) चिन्ह लगाए  
Note: Please put cross (X) mark in blank boxes

User ID No. 706179  
SBI 3032  
22 MAY 2008  
M.G. Road Secbad  
Cash Paid/Received/Transferred



# कर्मचारी राज्य बीमा निगम

## EMPLOYEES' STATE INSURANCE CORPORATION

ORIGINAL

QUADRUPPLICATE  
For Depositor to be attached  
with Return of Contributions

लेखा संख्या 1 में जमा करवाने के लिए चालान फार्म  
Challan Form for Deposit in A/C No.1

दिनांक Date 21 05 2008  
महीना Month 05  
वर्ष Year 2008

नियोजक कोड Employer's Code 52 26007 101 बैंक और शाखा कोड\* Bank & Branch Code\* 3 032

कारखान/स्थापना का नाम एवं पता  
Name of Factory/Estt. & Address M/S. MEHTA AND MODI HOMES  
5-4-137/3, & 4, 1 FLOOR,  
SOHAM MANSION, M.G. ROAD,  
SECUNDERABAD-500 003

अदायगी का स्वरूप (प्रयुक्त अदायगी स्वरूप कर (✓) का निशान लगाए)  
Mode of Payment (Tick (✓) mode used) नकद Cash  चेक Cheque  डि. ड्रा D.D.

चेक/डि. ड्रा. सं Cheque/DD No. 110288 दिनांक Dated 21 05 2008

आहरित (बैंक का नाम)  
Drawn on (Name of the Bank) SBI MG ROAD अंशदान अवधि  
Period of Contribution 2006

अदायगी विवरण (अदायगी के स्वरूप पर (✓) का निशान लगाए)  
Details of Payment [Tick (✓) mode used] नियमित अंशदान\* Regular Contribution  ब्याज Interest  हानि Damages  अन्य Others

कर्मचारियों की संख्या No. of Employees कुल मजदूरी Total Wages

कर्मचारी अंशदान Employee's Contribution									
नियोजक अंशदान Employer's Contribution									
# ब्याज # Interest									
# हानि # Damages									
# अन्य # Others								1398	00
# योग # Total								1398	00

कुल राशि (शब्दों में) Total amount (In words) ONE THOUSAND THREE HUNDRED NINETY EIGHT

# क्षेत्रीय कार्यालय मांग संख्या व दिनांक # R.O. Demand Letter No. & Date  
AP/INS-IV/52-26007-101/14  
DT. 25-4-2008  
PERIOD - MAY-06 TO OCT-2006  
हस्ताक्षर Signature For MEHTA & MODI HOMES

(जमाकर्ता द्वारा भरा जाए) (पावती) (Acknowledgement)  
(to be filled by Depositor)  
रुपये Received Rs.   
(मान (Rs. only)  
नकद/चेक/डि ड्रा सा दिनांक, कर बी नि लेखा सं ?  
के पक्ष में बैंक पर आहरित के द्वारा (नकदीकरण पर) प्राप्त किया।  
In Cash/ by Cheque/DD No: Dated (subject to Realisation) drawn on (Bank) in favour of ESIC Fund A/C No.1  
बैंक के प्रयोग के लिए For use in Bank  
बैंक सूची सं. Bank Scroll No.  
दिनांक Date  
प्राधिकृत हस्ताक्षर और प्राप्तकर्ता बैंक की सील  
Authorised signature & seal of the Receiving Bank

\* (बैंक शाखा कोड के लिए पीठ पृष्ठ देखें)  
(For Bank Branch Code see on reverse)  
नोट : कृपया खाली खानों में (X) चिन्ह लगाए  
Note: Please put cross (X) mark in blank boxes

# ESIC

ORIGINAL (for Bank)  
 DUPLICATE (for ESIC through Bank)  
 TRIPLICATE (for Depositor)  
 QUADRUPPLICATE (through Depositor)

EMPLOYEES STATE INSURANCE FUND ACCOUNT No. 1

PAY-IN-SLIP FOR CONTRIBUTION

Challan No.

STATE BANK OF INDIA

Station: M.G. ROAD - SEC

Dated: 11-4-2008

Particulars of Cash/Cheque No.	Amount	
	Rs.	P.
SBI M.G. Road Ch. No. 110265	4666	00
Total	4666	00

Paid into the credit of the Employees State Insurance Fund Account No. 1

Rs. 4666 = 00

(Rupees Four thousand six hundred - only)

in Cash/by Cheque (on realisation) for payment of contribution as per details given below under the Employees' State Insurance Act, 1948, for the month of MARCH - 2008

Deposited by: [Signature]

Employer's Code No. 52-2607-101

Name and Address of Factory/Establishment: M/s. MEHTA AND MODI HOME  
5-4-187, 3. & 4, II FLOOR,  
SOHAM MANSION, M. G. ROAD,  
SECUNDERABAD - 500 003

No. of Employees: 16

Total Wages Rs. 41784 = 00

Employee's Contribution Rs. 1256 = 00

Employer's Contribution Rs. 3410 = 00

Total Rs. 4666 = 00

(For use in Bank)

**ACKNOWLEDGEMENT**

(to be filled by depositor)

Received payment with Cash/Cheque/Draft No. 110265  
 dated: 11-4-2008 for Rs. 4666 = 00 (Rupees 4666 = 00)

drawn on: [Bank Name] only) (Bank)

in favour of Employees' State Insurance Fund Account No. 1

Sl. No. in Bank's Scroll: \_\_\_\_\_

Date: \_\_\_\_\_

Authorised Signatory of the receiving Bank

User ID No. 788179 | K.L. NARAYANA  
 SBI 3032 | 11 APR 2008 | M.G. Road Secbad  
 Cash Paid/Received/Transferred