



EMPLOYEES' STATE INSURANCE CORPORATION

FORM 5-A

(Regulation 31 – Second Proviso)

**STATEMENT OF ADVANCE PAYMENT OF CONTRIBUTIONS
MADE FOR THE CONTRIBUTION PERIOD ENDED**

Total contribution amounting to Rs. comprising of Rs.

As employers' share and Rs. as employees' share paid as under :-

Sl. No.	Details of Advance Payment	Amount		Details of actual contribution paid	Amount		Balance	
		Rs.	P		R.s	P	Rs.	P
	2	3		4	5		6	
1	Opening Balance							
2	Challan dated			*April/October				
3	Challan dated			* May / November				
4	Challan dated			* June / December				
5	Challan dated			* July / January				
6	Challan dated			* August/ February				
7	Challan dated			* September/March				
	Total (i)			Total (ii) Total due for Contribution period				
				Total amount paid in Advance				
				Balance				

Total (ii) should not be less than total (i) at any time.

* Strike out which is not applicable

Place
Date

Signature
Designation