

Period ending ----- June 30, 19 .

Name of the factory .....

Name of occupier

Name of the manager 1. District 2. Postal address 3. Nature of industry

4A. Average number of workers employed daily.

Directly by occupier Total average	Directed by the contractors
Men..... .....	.....
Women..... .....	.....
Adolescents-	
Male .....	.....
Female..... .....	.....
Children-	
Male .....	.....
Female ..... .....	.....

4-B. Name and address of the contractor

(s) .....

5. Number of days worked during the half year ending.

I certify that information given above by me/us is true and correct to the best of my/our knowledge.

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Signature of Occupier  
Manager

Signature of