THE PUNJAB EMPLOYEE'S SOCIAL SECURITY INSTITUTION

Return of Employees Liable to become Secured Persons

Name of Establishment _____

Registration Number : | | | |

Address : _____

I hereby declare that every person employed as an employee within the meaning of Section 2(8) of the Punjab Employee's Social Security Ordinance, 1965 on.....in this factory/establishment has been included in this list excepting only those employees in respect of whom registration forms (Form R-2) have already been submitted

Signature

Date _____ Title _____

Sr. No.	Name of Employee	Father's Name	Works Number *(if any)*	Registration Number Allotted by Institution (for official use only)
(1)	(2)	(3)	(4)	(5)