

FORM C

[See Rule 6 (3)]

**STATEMENT OF DISBURSEMENTS, SECTION 8(4) OF THE WORKMEN'S COMPENSATION
ACT, 1923**

Serial No

Depositor

Date.

Rs.

Amount deposited :

Amount deducted and repaid to
employer under the proviso to Section 8 (1) :

Funeral expenses paid :

Compensation paid to the following dependants

Name	Relationship	Rs.
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Total Rs.....

Dated20.....

Commissioner