

Workmen's Compensation Rules FORM C

See Rule 6

Statement of Disbursements

Section 8(4) of the Workmen's Compensation Act, 1923

Serial No. _____

Depositor _____

Date _____ Rs. _____

Amount deposited _____

Amount deducted and re-paid to the employer under the proviso to Section 8(1). _____

Funeral expenses paid _____

Compensation paid to the following dependants:

Name	Relationship

Total _____

Dated _____ 19 _____.

Commissioner