

FORM 10
[See rule 12(1)]
Maternity Benefit Register

1. Name of the woman	NILL
2. Date of appointment	NILL
3. Department in which employed	NILL
4. Nature of work	NILL
5. Dates (which month and year) on which she is laid-off and not employed.	NILL
6. Total days employed in the	NILL
7. Date on which woman gives payment period. Notice under section 6 of the Maternity benefit Act, 1961.	NILL
8. Date of birth of child	NILL
9. Date of production of proof of pregnancy under section 6 of Maternity Benefit Act, 1961.	NILL
10. Date of production of proof of delivery/miscarriage/death	NILL
11. Where the maternity benefit delivery, the date on which is paid in advance before it is paid and the amount thereof	NILL
12. Date on which subsequent payment of maternity benefit is made and the amount thereof	NILL
13. Where the medical bonus is paid, the date on which it is paid and the amount thereof.	NILL
14. Date on which wages on account of leave are paid and amount thereof.	NILL
15. Name of the person nominated by the woman.	NILL
16. If the woman dies, the date of her death, the name of the person to whom maternity benefit and/or other amount was paid, the amount thereof, and the date of payment.	NILL
17. If the woman dies, and the child survives, the name of the person to whom the amount of maternity benefit was paid on behalf of the child and the period for which it was paid.	NILL
18. Remarks column for use of Inspector.	NILL