FORM III

[see rules 19 (5)]

Muster Roll for the Month of _____

Name of Factory_____

Department_____

Branch/Section/Group, etc _____

Address_____

Working hours

I Period From _____ to_____

Interval From _____ to_____

II Period _____ From _____ to_____

| 1 | 2 | 3 | 4 | 5 | 6 | 7 | 8 | 9 | 10 |
|---|---|---|---|---|---|---|---|---|---|
| Serial No | Name of employee | Father's / husband's name | Token or Ticket No. | Age | Sex | Date of first appointment | Occupation | Monthly record the daily attendance of each worker | Remarks |
| | | | | | | | | | |
| | | | | | | | | | |
| | | | | | | | | | |