



Login User: 1013732624

Contribution Details

Details

Insurance Person Number :	<input type="text" value="1013732624"/>	Insurance person Name :	<input type="text" value="AMAR NAYAK"/>
Contribution Period	<input type="text" value="Apr - Sep"/>	Year	<input type="text" value="2017"/>

Submit

Individual Month Contribution

Wage Period	Total Monthly Wages	Number of Days wages paid/payable	Employee Contribution
April-2017	10790.00	26	189.00
May-2017	12450.00	31	218.00
June-2017	14257.00	30	250.00
July-2017	14257.00	31	250.00
August-2017	14257.00	31	250.00
<b>Totals</b>	<b>66011.00</b>	<b>149</b>	<b>1157.00</b>

Cancel

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Login User: 1112602540

**Contribution Details**

**Details**

Insurance Person Number :	<input type="text" value="1112602540"/>	Insurance person Name :	<input type="text" value="SUNIL KUMAR"/>
Contribution Period	<input type="text" value="Apr - Sep"/>	Year	<input type="text" value="2017"/>
<input type="button" value="Submit"/>			

**Individual Month Contribution**

Wage Period	Total Monthly Wages	Number of Days wages paid/payable	Employee Contribution
April-2017	14500.00	30	254.00
May-2017	14500.00	31	254.00
June-2017	17500.00	30	307.00
July-2017	17500.00	31	307.00
August-2017	17500.00	31	307.00
<b>Totals</b>	<b>81500.00</b>	<b>153</b>	<b>1429.00</b>

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