

**FORM NO. 21**  
Half yearly return  
Period ending 30<sup>th</sup> June 19/31<sup>st</sup> December, 200....

Name of the factory.....

Name of the Occupier.....

Name of the Manager.....

1. District.....

2. Postal Address.....

3. Nature of Industry.....

4. Average number of workers employed daily-

Men.....

Women.....

Adolescent-

Male.....

Female.....

Children-

Male.....

Female.....

5. Number of days worked during the year ending 30<sup>th</sup> June, 200...

Certified that the information furnished above is to the best of my knowledge and belief correct.

Signature of Manager