ANNEXURE – III

[Rule 21 (a)]

KERALA STATE CO-OPERATIVE EMPLOYEES' WELFARE BOARD

(Ledger to be maintained by the Society/Bank)

1. **Name of Employee :**
2. **Designation at the time of option :**
3. **Date of Option :**
4. **Amount of monthly contribution :**
5. **Code No. of the employee and institution :**
6. **Account No. of DCB for remit the contribution :**

DETAILS OF RECOVERY

Sl.No	Month to which it relates	Date of recovery	Amount recovered for the month	Amount contributed by the society	Date of remittance in the DCB	Total amount to his/her credit	Initial of the Chief Executive of the Institution	Initial of the Auditor
(1)	(2)	(3)	(4)	(5)	(6)	(7)	(8)	(9)