

| Form "XXI"      REGISTER OF DEDUCTION FOR DAMAGE OR LOSS                                                                               |      |                              |                                 |                           |                                                                                      |                                                                                              |        |                          |                     |                    |
|----------------------------------------------------------------------------------------------------------------------------------------|------|------------------------------|---------------------------------|---------------------------|--------------------------------------------------------------------------------------|----------------------------------------------------------------------------------------------|--------|--------------------------|---------------------|--------------------|
| Name And Address of Contractor      SNOWHILL RAINBOW PVT. LTD N- 304 Mangol puri New Delhi - 110083                                    |      |                              |                                 |                           |                                                                                      |                                                                                              |        |                          |                     |                    |
| Location Of Work -      DLF CAPITAL POINT New Delhi                                                                                    |      |                              |                                 |                           |                                                                                      |                                                                                              |        |                          |                     |                    |
| Name and address of Principal EMPLOYER -      C & W PMSI PVT LTD<br>JA -1120-1121 - 11TH FLOWER DISTT. CENTER JASOLA NEW DELHI -110025 |      |                              |                                 |                           |                                                                                      |                                                                                              |        |                          |                     |                    |
| SL NO                                                                                                                                  | NAME | Father 's/<br>husband's Name | Damage Or<br>Loss<br>Particlars | Damage<br>Or Loss<br>Date | Whether<br>Workman<br>Showed<br>cause<br>against<br>Deduction if<br>so Enter<br>Date | Name Of<br>Person in<br>Whose<br>Presence<br>Employee,<br>s<br>Explannati<br>on was<br>Heard | Amount | No of<br>Instalmen<br>ts | First<br>Instalment | Last<br>Instalment |
|                                                                                                                                        |      |                              |                                 |                           |                                                                                      |                                                                                              |        |                          |                     |                    |
| <b>NO DEDUCTION FOR DAMAGE OR LOSS FOR THE MONTH NOV.2019</b>                                                                          |      |                              |                                 |                           |                                                                                      |                                                                                              |        |                          |                     |                    |
|                                                                                                                                        |      |                              |                                 |                           |                                                                                      |                                                                                              |        |                          |                     |                    |
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