| FORM XX | | | | | | | | | | | |
|--|---|-----------------------|----------------|------------|----------------|----------------|-------------|-------------|------------------|------------|---------|
| | | | | | [See Rule 78 | B(1) (a) (ii)] | | | | | |
| | REGISTER OF | DEDUCTION FOR D | AMAGE OR | LOSS | | | | | | | |
| | | | | | DAINIDOM | | 20444 | | 1: 44000 | | |
| Name And Address of Contractor SNOWHILL RAINBOW PVT. LTD N- 304 Mangol puri New Delhi - 110083 | | | | | | | | | nı - 110083 | | |
| | n Of Work - | JR Sood & Co. Pvt. Lt | td-Delhi (JR S | | | | | | | | |
| lame ar | nd address of Prir | ncipal EMPLOYER - | | C & W PMS | SI PVT LTD | | | | | | |
| | | | | JA -1120-1 | 1121 - 11TH FI | LOWER DIST | T. CENTER . | ASOLA NEW D | ELHI -110025 | | |
| SL NO | NAME | Father 's/ husband's | Damage Or | Damage Or | Whether | Name Of | Amount | No of | Date of Recovery | | |
| | | Name | Loss | Loss Date | Workman | Person in | | Instalments | First | Last | Remarks |
| | | | Particlars | | Showed | Whose | | | Instalment | Instalment | |
| | | | | | cause against | Presence | | | | | |
| | | | | | Deduction if | Employee,s | | | | | |
| | | | | | so Enter Date | Explannatio | | | | | |
| | | | | | | n was Heard | | | | | |
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| | NO DEDUCTION FOR DAMAGE OR LOSS FOR THE Month of NOV., 2020 | | | | | | | | | | |
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