					FRON						
					[See Rule 78	TION FOR DAMAGE OR LO	nss				
Name	And Addr	ess of Contractor			Hill N- 304 Mangol pur		, , , , , , , , , , , , , , , , , , , 				
	Location Of Work DLF Avenue Mall Saket New Delhi				III 14 304 Mangor par	1 New Dellii 110005					
	Name and address of Principal EMPLOYER -				C & W PMSI PVT LTD						
Ivanic	varie and address of Filliopal Livil LOTER				JA -1120-1121 - 11TH FLOWER DISTT. CENTER JASOLA NEW DELHI -110025						
SL NO	NAME	Father 's/ Husband's Name			Whether Workman Showed cause against Deduction if so Enter Date	Name Of Person in Whose Presence Employee,s Explannation was Heard		No of Instalments	First Instalment	Last Instalment	
		N	o Deduction	for dama	ages OR loss repo	rted in the month of	April- 20	24			
	No Deduction for damages OR loss reported in the month of April- 2024										
										Mangolgari L	