



Form-XIV
(see Rule 76)
Employment Card

Name & Address of Contractor:

G4S Secure Solutions India Private Limited
47-48, C Block Community Center Naraina, New Delhi-110028

Name and address of establishment in / under which
contract is carried on :

PRIONE BUSINESS SERVICES PRIVATE LIMITED
H-9, MCIE, BADARPUR,,,

Nature and Location of work:

Security & Services H-9, MCIE, BADARPUR,,,

Name and address of Principal Employer :

PRIONE BUSINESS SERVICES PRIVATE LIMITED

1	Name of the workman and address	MUNNA KUMAR
2	S.No. in the register of workman employed	
3	Nature of employment / designation	HEAD GUARD
4	Wages rate (with particularly of unit in case of piece work)	16726.00
5	Wage period	Monthly
6	Tenure of Employment	16-04-1997
7	Remarks	

Signature of the Contractor





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(see Rule 76)
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G4S Secure Solutions India Private Limited
47-48, C Block Community Center Naraina, New Delhi-110028

Name and address of establishment in / under which
contract is carried on :

PRIONE BUSINESS SERVICES PRIVATE LIMITED
H-9, MCIE, BADARPUR,,,

Nature and Location of work:

Security & Services H-9, MCIE, BADARPUR,,,

Name and address of Principal Employer :

PRIONE BUSINESS SERVICES PRIVATE LIMITED

1	Name of the workman and address	KRISHAN PAL
2	S.No. in the register of workman employed	
3	Nature of employment / designation	HEAD GUARD
4	Wages rate (with particularly of unit in case of piece work)	16726.00
5	Wage period	Monthly
6	Tenure of Employment	01-02-2000
7	Remarks	

Signature of the Contractor





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(see Rule 76)
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G4S Secure Solutions India Private Limited
47-48, C Block Community Center Naraina, New Delhi-110028

Name and address of establishment in / under which contract is carried on :

PRIONE BUSINESS SERVICES PRIVATE LIMITED
H-9, MCIE, BADARPUR,,,

Nature and Location of work:

Security & Services H-9, MCIE, BADARPUR,,,

Name and address of Principal Employer :

PRIONE BUSINESS SERVICES PRIVATE LIMITED

1	Name of the workman and address	SONU SINGH TOMAR
2	S.No. in the register of workman employed	
3	Nature of employment / designation	HEAD GUARD
4	Wages rate (with particularly of unit in case of piece work)	16666.00
5	Wage period	Monthly
6	Tenure of Employment	27-12-2006
7	Remarks	

Signature of the Contractor





**MUSTER ROLL
Rule 78(1)(a)(i)
Form XVI**

Name & Address of Contractor : G4S SECURE SOLUTIONS (INDIA) PVT.LTD., 47-48, C Block Community Center Naraina, New Delhi-110028

Nature and Location of Work : Security Services, Watch/Ward H-9, MCIE, BADARPUR

Name & Address of Establishment In/ under which contract is carried on : PRIONE BUSINESS SERVICES PRIVATE LIMITED H-9, MCIE, BADARPUR

Name and Address of Principal employer : PRIONE BUSINESS SERVICES PRIVATE LIMITED H-9, MCIE, BADARPUR

For the month of : Jun, 2022

SI No.	Clock NO.	Name	Father Name	Gender	1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	17	18	19	20	21	22	23	24	25	26	27	28	29	30	Present Days
1	13226	MUNNA KUMAR	Hari Singh	MALE	P	P	P	P	A	P	W	P	P	P	P	A	P	W	P	P	P	P	A	P	W	P	P	P	P	A	P	W	P	P	22
2	21024	KRISHAN PAL	Budh Singh	MALE	P	P	P	P	W	P	P	P	P	P	P	W	P	P	P	P	P	P	W	P	P	P	P	P	P	W	P	P	P	P	26
3	186368	SONU SINGH TOMAR	BUDH SINGH	MALE	P	P	P	P	A	W	P	P	P	P	P	A	W	P	P	P	P	P	A	W	P	P	P	P	A	W	P	P	P	22	





REGISTER OF WAGES
Form XVII
Rule 78(1)(a)(i)

Name & Address of Contractor : G4S SECURE SOLUTIONS (INDIA) PVT.LTD., 47-48, C Block Community Center Naraina, New Delhi-110028

Nature and Location of Work : Security, Watch/Ward H-9, MCIE, BADARPUR

Name & Address of Establishment In/ under which contract is carried on : PRIONE BUSINESS SERVICES PRIVATE LIMITED H-9, MCIE, BADARPUR

Name and Address of Principal employer : PRIONE BUSINESS SERVICES PRIVATE LIMITED H-9, MCIE, BADARPUR

For the month of : Jun, 2022

SNo.	Emp Code	Employee Name	Designation	Attd (in days)	Monthly rate of wages/piece rate	BASIC	VDA	WA	Arrear	Site Allow	Other Allow	OT/NFH	Total	PF	ESI	LWF	VDD	GPAL	Other Ded	Total Ded	Net Amount Paid	Account No	Bank Name	Signature
1	13226	MUNNA KUMAR	HEAD GUARD	26	16626	16626	0	100	0	2384	13385	0	32495	1800	243	1	22	0	0	2066	30429	'0602000115335091	PUNJAB NATIONAL BANK	Bank Transfer
2	21024	KRISHAN PAL	HEAD GUARD	26	16626	16626	0	100	0	2384	13385	0	32495	1800	243	1	22	0	0	2066	30429	'1768101111402	CANARA BANK	Bank Transfer
3	186368	SONU SINGH TOMAR	HEAD GUARD	26	16566	16566	0	100	0	2384	13385	0	32435	1800	243	1	22	0	0	2066	30369	'503010262055	KOTAK MAHINDRA BANK	Bank Transfer





FORM XIX
See Rule 78(1) (b)
Wage Slip

Name & Address of Contractor:G4S Secure Solution (India) Pvt.Ltd

Name & Address of Establishment In/ under which contract is carried on:PRIONE BUSINESS SERVICES PRIVATE LIMITED

Nature and Location of Work:Security Services

Name and Address of Principal employer:PRIONE BUSINESS SERVICES PRIVATE LIMITED H-9, MCIE, BADARPUR,,,

Month:Jun, 2022

Name of Workman: MUNNA KUMAR

Father Name: Hari Singh

Designation: HEAD GUARD

1.	No. of Days Worked	26
2.	No. of units worked in case of piece-rate workers	NIL
3.	Rate of daily wages/piece-rate	643.00
4.	Amount of overtime wages	NIL
5.	Gross wages payable	32495.00
6.	Deductions, if any	2066.00
7.	Net amount of wages paid	30429.00

Initials of the Contractor or his Representative





FORM XIX
See Rule 78(1) (b)
Wage Slip

Name & Address of Contractor:G4S Secure Solution (India) Pvt.Ltd

Name & Address of Establishment In/ under which contract is carried on:PRIONE BUSINESS SERVICES PRIVATE LIMITED

Nature and Location of Work:Security Services

Name and Address of Principal employer:PRIONE BUSINESS SERVICES PRIVATE LIMITED H-9, MCIE, BADARPUR,,,

Month:Jun, 2022

Name of Workman: KRISHAN PAL

Father Name: Budh Singh

Designation: HEAD GUARD

1.	No. of Days Worked	26
2.	No. of units worked in case of piece-rate workers	NIL
3.	Rate of daily wages/piece-rate	643.00
4.	Amount of overtime wages	NIL
5.	Gross wages payable	32495.00
6.	Deductions, if any	2066.00
7.	Net amount of wages paid	30429.00

Initials of the Contractor or his Representative





FORM XIX
See Rule 78(1) (b)
Wage Slip

Name & Address of Contractor:G4S Secure Solution (India) Pvt.Ltd

Name & Address of Establishment In/ under which contract is carried on:PRIONE BUSINESS SERVICES PRIVATE LIMITED

Nature and Location of Work:Security Services

Name and Address of Principal employer:PRIONE BUSINESS SERVICES PRIVATE LIMITED H-9, MCIE, BADARPUR,,,

Month:Jun, 2022

Name of Workman: SONU SINGH TOMAR

Father Name: BUDH SINGH

Designation: HEAD GUARD

1.	No. of Days Worked	26
2.	No. of units worked in case of piece-rate workers	NIL
3.	Rate of daily wages/piece-rate	641.00
4.	Amount of overtime wages	NIL
5.	Gross wages payable	32435.00
6.	Deductions, if any	2066.00
7.	Net amount of wages paid	30369.00

Initials of the Contractor or his Representative



Form A
(See Rule 3)
Muster Roll (Maternity Benefit Act 1961)

	Name of Establishment			PRIONE BUSINESS SERVICES PRIVATE LIMITED, H-9, MCIE, BADARPUR	
1	Serial Number			NO CASE INVOLVED	
2	Name of the woman and her Father or if married, Husband Name				
3	Date of Appointment				
4	Nature of work				
5	Dates with month and year in which she is employed, laid off and not employed				
	Month	No. of days employed	No. of days laid off	No. of days not employed	Remarks
No Any Maternity Leave Availed by G4S Lady Gaurd for the month of : Jun, 2022					
6	Date on which the woman gives notice under Section 6			Nil	
7	Date of Discharge or Dismissal, if any.				
8	Date of production of proof of pregnancy under section 6				
9	Date of birth of child				
10	Date of production of proof of delivery or miscarriage or death				
11	Date of production of proof of illness referred to in section 10				
12	Date with the amount of maternity benefit paid in advance of expected delivery				
13	Date with the amount of subsequent payment of maternity benefit.				
14	Date with the amount of medical bonus, if paid under section 8				
15	Date with the amount of wages paid on account of leave under section 9.				
16	Date with amount of wages paid on account of leave under section 10 and period of leave granted				
17	Name of the person nominated by the woman under section 6				
18	If the woman dies, the date of her death, the name of the person to whom maternity benefit and / or other amount was paid, the amount thereof, and the date of payment				
19	If the woman dies and the child survives, the name of the person to whom the amount of maternity benefit was paid on behalf of the child and the period for which it was paid				
20	Signature of the employer of the establishment authenticating the entries in the muster roll				
21	Remarks column for the use of the Inspector				

