



**Form-XIV**  
**(see Rule 76)**  
**Employment Card**

Name & Address of Contractor:

G4S Secure Solutions India Private Limited  
49, Rani Jhansi Road, Opp. Jhandewalan Mata Mandir, New Delhi -  
110055

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

SHROFF S CHARITY EYE HOSPITAL  
KEDAR NATH ROAD,DARYAGANJ,,NEW DELHI

Nature and Location of work:

Security & Services KEDAR NATH ROAD,DARYAGANJ,,NEW  
DELHI

Name and address of Principal Employer :

SHROFF S CHARITY EYE HOSPITAL

1	Name of the workman and address	SUBHASH CHAND KAUSHIK
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)	16706.00
5	Wage period	Monthly
6	Tenure of Employment	19-10-1995
7	Remarks	

Signature of the Contractor





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**Employment Card**

Name & Address of Contractor:

G4S Secure Solutions India Private Limited  
49, Rani Jhansi Road, Opp. Jhandewalan Mata Mandir, New Delhi -  
110055

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

SHROFF S CHARITY EYE HOSPITAL  
KEDAR NATH ROAD,DARYAGANJ,,NEW DELHI

Nature and Location of work:

Security & Services KEDAR NATH ROAD,DARYAGANJ,,NEW  
DELHI

Name and address of Principal Employer :

SHROFF S CHARITY EYE HOSPITAL

1	Name of the workman and address	MAHIPAL SINGH
2	S.No. in the register of workman employed	
3	Nature of employment / designation	SUPERVISOR
4	Wages rate (with particularly of unit in case of piece work)	20119.00
5	Wage period	Monthly
6	Tenure of Employment	03-01-1996
7	Remarks	

Signature of the Contractor





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**Employment Card**

Name & Address of Contractor:

G4S Secure Solutions India Private Limited  
49, Rani Jhansi Road, Opp. Jhandewalan Mata Mandir, New Delhi -  
110055

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

SHROFF S CHARITY EYE HOSPITAL  
KEDAR NATH ROAD,DARYAGANJ,,NEW DELHI

Nature and Location of work:

Security & Services KEDAR NATH ROAD,DARYAGANJ,,NEW  
DELHI

Name and address of Principal Employer :

SHROFF S CHARITY EYE HOSPITAL

1	Name of the workman and address	SHRINIWAS SUKLA
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)	16706.00
5	Wage period	Monthly
6	Tenure of Employment	12-06-1996
7	Remarks	

Signature of the Contractor





**Form-XIV**  
**(see Rule 76)**  
**Employment Card**

Name & Address of Contractor:

G4S Secure Solutions India Private Limited  
49, Rani Jhansi Road, Opp. Jhandewalan Mata Mandir, New Delhi -  
110055

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

SHROFF S CHARITY EYE HOSPITAL  
KEDAR NATH ROAD,DARYAGANJ,,NEW DELHI

Nature and Location of work:

Security & Services KEDAR NATH ROAD,DARYAGANJ,,NEW  
DELHI

Name and address of Principal Employer :

SHROFF S CHARITY EYE HOSPITAL

1	Name of the workman and address	SURENDRA PAL
2	S.No. in the register of workman employed	
3	Nature of employment / designation	SUPERVISOR
4	Wages rate (with particularly of unit in case of piece work)	20210.00
5	Wage period	Monthly
6	Tenure of Employment	19-08-1996
7	Remarks	

Signature of the Contractor





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**Employment Card**

Name & Address of Contractor:

G4S Secure Solutions India Private Limited  
49, Rani Jhansi Road, Opp. Jhandewalan Mata Mandir, New Delhi -  
110055

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

SHROFF S CHARITY EYE HOSPITAL  
KEDAR NATH ROAD,DARYAGANJ,,NEW DELHI

Nature and Location of work:

Security & Services KEDAR NATH ROAD,DARYAGANJ,,NEW  
DELHI

Name and address of Principal Employer :

SHROFF S CHARITY EYE HOSPITAL

1	Name of the workman and address	ANIL KR SINGH
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)	16716.00
5	Wage period	Monthly
6	Tenure of Employment	26-02-1998
7	Remarks	

Signature of the Contractor





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49, Rani Jhansi Road, Opp. Jhandewalan Mata Mandir, New Delhi -  
110055

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

SHROFF S CHARITY EYE HOSPITAL  
KEDAR NATH ROAD,DARYAGANJ,,NEW DELHI

Nature and Location of work:

Security & Services KEDAR NATH ROAD,DARYAGANJ,,NEW  
DELHI

Name and address of Principal Employer :

SHROFF S CHARITY EYE HOSPITAL

1	Name of the workman and address	DEEPAK LAL
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)	16706.00
5	Wage period	Monthly
6	Tenure of Employment	25-06-1998
7	Remarks	

Signature of the Contractor





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G4S Secure Solutions India Private Limited  
49, Rani Jhansi Road, Opp. Jhandewalan Mata Mandir, New Delhi -  
110055

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

SHROFF S CHARITY EYE HOSPITAL  
KEDAR NATH ROAD,DARYAGANJ,,NEW DELHI

Nature and Location of work:

Security & Services KEDAR NATH ROAD,DARYAGANJ,,NEW  
DELHI

Name and address of Principal Employer :

SHROFF S CHARITY EYE HOSPITAL

1	Name of the workman and address	MANOJ 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	24-11-2000
7	Remarks	

Signature of the Contractor





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110055

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

SHROFF S CHARITY EYE HOSPITAL  
KEDAR NATH ROAD,DARYAGANJ,,NEW DELHI

Nature and Location of work:

Security & Services KEDAR NATH ROAD,DARYAGANJ,,NEW  
DELHI

Name and address of Principal Employer :

SHROFF S CHARITY EYE HOSPITAL

1	Name of the workman and address	DEV RAJ
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	12-01-2004
7	Remarks	

Signature of the Contractor







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G4S Secure Solutions India Private Limited  
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110055

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

SHROFF S CHARITY EYE HOSPITAL  
KEDAR NATH ROAD,DARYAGANJ,,NEW DELHI

Nature and Location of work:

Security & Services KEDAR NATH ROAD,DARYAGANJ,,NEW  
DELHI

Name and address of Principal Employer :

SHROFF S CHARITY EYE HOSPITAL

1	Name of the workman and address	SATENDRA 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)	16666.00
5	Wage period	Monthly
6	Tenure of Employment	09-07-2004
7	Remarks	

Signature of the Contractor





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49, Rani Jhansi Road, Opp. Jhandewalan Mata Mandir, New Delhi -  
110055

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

SHROFF S CHARITY EYE HOSPITAL  
KEDAR NATH ROAD,DARYAGANJ,,NEW DELHI

Nature and Location of work:

Security & Services KEDAR NATH ROAD,DARYAGANJ,,NEW  
DELHI

Name and address of Principal Employer :

SHROFF S CHARITY EYE HOSPITAL

1	Name of the workman and address	RAVINDER 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)	16706.00
5	Wage period	Monthly
6	Tenure of Employment	15-01-2005
7	Remarks	

Signature of the Contractor





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110055

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

SHROFF S CHARITY EYE HOSPITAL  
KEDAR NATH ROAD,DARYAGANJ,,NEW DELHI

Nature and Location of work:

Security & Services KEDAR NATH ROAD,DARYAGANJ,,NEW  
DELHI

Name and address of Principal Employer :

SHROFF S CHARITY EYE HOSPITAL

1	Name of the workman and address	VIJAY SINGH
2	S.No. in the register of workman employed	
3	Nature of employment / designation	GUARD
4	Wages rate (with particularly of unit in case of piece work)	16606.00
5	Wage period	Monthly
6	Tenure of Employment	11-09-2015
7	Remarks	

Signature of the Contractor





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G4S Secure Solutions India Private Limited  
49, Rani Jhansi Road, Opp. Jhandewalan Mata Mandir, New Delhi -  
110055

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

SHROFF S CHARITY EYE HOSPITAL  
KEDAR NATH ROAD,DARYAGANJ,,NEW DELHI

Nature and Location of work:

Security & Services KEDAR NATH ROAD,DARYAGANJ,,NEW  
DELHI

Name and address of Principal Employer :

SHROFF S CHARITY EYE HOSPITAL

1	Name of the workman and address	NARESH KUMAR
2	S.No. in the register of workman employed	
3	Nature of employment / designation	GUARD
4	Wages rate (with particularly of unit in case of piece work)	16606.00
5	Wage period	Monthly
6	Tenure of Employment	04-11-2008
7	Remarks	

Signature of the Contractor





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**Employment Card**

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49, Rani Jhansi Road, Opp. Jhandewalan Mata Mandir, New Delhi -  
110055

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

SHROFF S CHARITY EYE HOSPITAL  
KEDAR NATH ROAD,DARYAGANJ,,NEW DELHI

Nature and Location of work:

Security & Services KEDAR NATH ROAD,DARYAGANJ,,NEW  
DELHI

Name and address of Principal Employer :

SHROFF S CHARITY EYE HOSPITAL

1	Name of the workman and address	AJAY KUMAR
2	S.No. in the register of workman employed	
3	Nature of employment / designation	GUARD
4	Wages rate (with particularly of unit in case of piece work)	16606.00
5	Wage period	Monthly
6	Tenure of Employment	03-03-2016
7	Remarks	

Signature of the Contractor





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G4S Secure Solutions India Private Limited  
49, Rani Jhansi Road, Opp. Jhandewalan Mata Mandir, New Delhi -  
110055

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

SHROFF S CHARITY EYE HOSPITAL  
KEDAR NATH ROAD,DARYAGANJ,,NEW DELHI

Nature and Location of work:

Security & Services KEDAR NATH ROAD,DARYAGANJ,,NEW  
DELHI

Name and address of Principal Employer :

SHROFF S CHARITY EYE HOSPITAL

1	Name of the workman and address	PAWAN KUMAR
2	S.No. in the register of workman employed	
3	Nature of employment / designation	GUARD
4	Wages rate (with particularly of unit in case of piece work)	16606.00
5	Wage period	Monthly
6	Tenure of Employment	17-08-2009
7	Remarks	

Signature of the Contractor





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**Employment Card**

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G4S Secure Solutions India Private Limited  
49, Rani Jhansi Road, Opp. Jhandewalan Mata Mandir, New Delhi -  
110055

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

SHROFF S CHARITY EYE HOSPITAL  
KEDAR NATH ROAD,DARYAGANJ,,NEW DELHI

Nature and Location of work:

Security & Services KEDAR NATH ROAD,DARYAGANJ,,NEW  
DELHI

Name and address of Principal Employer :

SHROFF S CHARITY EYE HOSPITAL

1	Name of the workman and address	SUNIL KUMAR
2	S.No. in the register of workman employed	
3	Nature of employment / designation	GUARD
4	Wages rate (with particularly of unit in case of piece work)	16606.00
5	Wage period	Monthly
6	Tenure of Employment	25-08-2009
7	Remarks	

Signature of the Contractor





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**Employment Card**

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G4S Secure Solutions India Private Limited  
49, Rani Jhansi Road, Opp. Jhandewalan Mata Mandir, New Delhi -  
110055

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

SHROFF S CHARITY EYE HOSPITAL  
KEDAR NATH ROAD,DARYAGANJ,,NEW DELHI

Nature and Location of work:

Security & Services KEDAR NATH ROAD,DARYAGANJ,,NEW  
DELHI

Name and address of Principal Employer :

SHROFF S CHARITY EYE HOSPITAL

1	Name of the workman and address	SITA DEVI
2	S.No. in the register of workman employed	
3	Nature of employment / designation	LADY GUARD
4	Wages rate (with particularly of unit in case of piece work)	16606.00
5	Wage period	Monthly
6	Tenure of Employment	08-01-2010
7	Remarks	

Signature of the Contractor







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**Employment Card**

Name & Address of Contractor:

G4S Secure Solutions India Private Limited  
49, Rani Jhansi Road, Opp. Jhandewalan Mata Mandir, New Delhi -  
110055

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

SHROFF S CHARITY EYE HOSPITAL  
KEDAR NATH ROAD,DARYAGANJ,,NEW DELHI

Nature and Location of work:

Security & Services KEDAR NATH ROAD,DARYAGANJ,,NEW  
DELHI

Name and address of Principal Employer :

SHROFF S CHARITY EYE HOSPITAL

1	Name of the workman and address	DEEPAK KUMAR
2	S.No. in the register of workman employed	
3	Nature of employment / designation	GUARD
4	Wages rate (with particularly of unit in case of piece work)	16606.00
5	Wage period	Monthly
6	Tenure of Employment	15-04-2010
7	Remarks	

Signature of the Contractor





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**Employment Card**

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G4S Secure Solutions India Private Limited  
49, Rani Jhansi Road, Opp. Jhandewalan Mata Mandir, New Delhi -  
110055

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

SHROFF S CHARITY EYE HOSPITAL  
KEDAR NATH ROAD,DARYAGANJ,,NEW DELHI

Nature and Location of work:

Security & Services KEDAR NATH ROAD,DARYAGANJ,,NEW  
DELHI

Name and address of Principal Employer :

SHROFF S CHARITY EYE HOSPITAL

1	Name of the workman and address	ABHAY KUMAR
2	S.No. in the register of workman employed	
3	Nature of employment / designation	GUARD
4	Wages rate (with particularly of unit in case of piece work)	16606.00
5	Wage period	Monthly
6	Tenure of Employment	02-01-2012
7	Remarks	

Signature of the Contractor





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**Employment Card**

Name & Address of Contractor:

G4S Secure Solutions India Private Limited  
49, Rani Jhansi Road, Opp. Jhandewalan Mata Mandir, New Delhi -  
110055

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

SHROFF S CHARITY EYE HOSPITAL  
KEDAR NATH ROAD,DARYAGANJ,,NEW DELHI

Nature and Location of work:

Security & Services KEDAR NATH ROAD,DARYAGANJ,,NEW  
DELHI

Name and address of Principal Employer :

SHROFF S CHARITY EYE HOSPITAL

1	Name of the workman and address	BIRENDRA DHAMA
2	S.No. in the register of workman employed	
3	Nature of employment / designation	GUARD
4	Wages rate (with particularly of unit in case of piece work)	16606.00
5	Wage period	Monthly
6	Tenure of Employment	25-01-2012
7	Remarks	

Signature of the Contractor





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G4S Secure Solutions India Private Limited  
49, Rani Jhansi Road, Opp. Jhandewalan Mata Mandir, New Delhi -  
110055

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

SHROFF S CHARITY EYE HOSPITAL  
KEDAR NATH ROAD,DARYAGANJ,,NEW DELHI

Nature and Location of work:

Security & Services KEDAR NATH ROAD,DARYAGANJ,,NEW  
DELHI

Name and address of Principal Employer :

SHROFF S CHARITY EYE HOSPITAL

1	Name of the workman and address	ABHIMANYU KUMAR JHA
2	S.No. in the register of workman employed	
3	Nature of employment / designation	GUARD
4	Wages rate (with particularly of unit in case of piece work)	16606.00
5	Wage period	Monthly
6	Tenure of Employment	16-06-2017
7	Remarks	

Signature of the Contractor





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**(see Rule 76)**  
**Employment Card**

Name & Address of Contractor:

G4S Secure Solutions India Private Limited  
49, Rani Jhansi Road, Opp. Jhandewalan Mata Mandir, New Delhi -  
110055

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

SHROFF S CHARITY EYE HOSPITAL  
KEDAR NATH ROAD,DARYAGANJ,,NEW DELHI

Nature and Location of work:

Security & Services KEDAR NATH ROAD,DARYAGANJ,,NEW  
DELHI

Name and address of Principal Employer :

SHROFF S CHARITY EYE HOSPITAL

1	Name of the workman and address	AJAY KUMAR
2	S.No. in the register of workman employed	
3	Nature of employment / designation	GUARD
4	Wages rate (with particularly of unit in case of piece work)	16606.00
5	Wage period	Monthly
6	Tenure of Employment	03-07-2013
7	Remarks	

Signature of the Contractor





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Name & Address of Contractor:

G4S Secure Solutions India Private Limited  
49, Rani Jhansi Road, Opp. Jhandewalan Mata Mandir, New Delhi -  
110055

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

SHROFF S CHARITY EYE HOSPITAL  
KEDAR NATH ROAD,DARYAGANJ,,NEW DELHI

Nature and Location of work:

Security & Services KEDAR NATH ROAD,DARYAGANJ,,NEW  
DELHI

Name and address of Principal Employer :

SHROFF S CHARITY EYE HOSPITAL

1	Name of the workman and address	DEEPAK KUMAR
2	S.No. in the register of workman employed	
3	Nature of employment / designation	GUARD
4	Wages rate (with particularly of unit in case of piece work)	16606.00
5	Wage period	Monthly
6	Tenure of Employment	22-06-2022
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., 49, Rani Jhansi Road, Opp. Jhandewalan Mata Mandir, New Delhi-110055

**Nature and Location of Work :** Security Services, Watch/Ward KEDAR NATH ROAD DARYAGANJ NEW DELHI

**Name & Address of Establishment In/ under which contract is carried on :** SHROFF S CHARITY EYE HOSPITAL KEDAR NATH ROAD DARYAGANJ NEW DELHI

**Name and Address of Principal employer :** SHROFF S CHARITY EYE HOSPITAL KEDAR NATH ROAD DARYAGANJ NEW DELHI

**For the month of :** Oct, 2022

Sl 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	31	Present Days
1	008870	SUBHASH CHAND KAUSHIK	Ram Bhajan	MALE	P	W	CL	P	P	P	P	A	W	P	P	P	P	P	P	W	P	P	A	P	P	P	W	P	P	A	P	A	P	W	P	22
2	009502	MAHIPAL SINGH	Girdhari Lal	MALE	P	A	W	P	P	P	P	P	P	W	P	P	CL	P	P	A	W	P	P	P	P	P	W	P	P	P	P	P	P	P	W	24
3	010932	SHRINIWA S SUKLA	Late Shri Nagendra Shukla	MALE	P	P	P	W	P	P	P	P	P	P	W	P	P	P	P	P	P	W	P	P	P	P	A	P	W	P	P	P	CL	CL	CL	26
4	011488	SURENDR A PAL	Late Chunni Lal	MALE	P	P	P	P	W	P	P	P	P	P	P	W	P	P	P	P	P	PL	PL	PL	P	P	P	P	A	W	P	P	P	A	P	26
5	016170	ANIL KR SINGH	Lalta Singh	MALE	P	A	P	P	P	W	P	P	P	A	P	P	W	P	P	A	P	P	P	W	P	P	P	P	CL	P	W	P	P	P	P	24
6	017160	DEEPAK LAL	Lt Sh Sohan Lal	MALE	CL	P	W	P	P	P	A	P	W	P	P	P	P	A	A	W	P	P	P	P	P	P	W	P	P	P	CL	A	P	W	22	
7	235955	NARESH KUMAR	JAGBIR SINGH	MALE	P	P	W	P	P	P	P	P	P	W	P	P	A	P	P	W	P	A	P	P	P	P	W	CL	CL	CL	A	P	A	P	23	
8	109860	VIJAY SINGH	RAM KRIPAL	MALE	A	P	W	P	P	P	A	P	P	W	A	CL	CL	P	P	P	W	P	P	P	A	P	P	W	P	P	P	P	A	A	W	20
9	020970	MANOJ KUMAR	Sh Abhayaram Singh	MALE	A	A	P	A	A	A	A	A	A	A	A	A	A	A	A	A	A	A	A	A	A	A	A	A	A	A	A	A	A	A	A	1
10	377303	PAWAN KUMAR	RISI PAL SINGH	MALE	P	P	P	CL	W	P	A	P	P	P	P	W	P	P	A	P	P	P	W	A	P	P	A	P	P	W	P	P	P	A	P	22
11	253102	AJAY KUMAR	IQBAL SINGH	MALE	P	A	P	W	P	P	P	P	P	W	P	P	P	A	P	P	W	P	P	P	A	P	P	W	CL	P	A	P	P	P	23	
12	026240	SATENDRA KUMAR	BALLU SINGH	MALE	P	P	W	P	P	P	P	P	P	W	P	A	P	P	P	A	W	P	P	P	P	P	P	W	P	P	P	P	P	P	W	24
13	025940	DEV RAJ	Chedi Ram	MALE	A	P	P	P	W	P	A	P	A	P	P	W	P	P	P	P	P	A	W	P	PL	PL	P	P	P	W	P	P	A	P	P	22
14	026496	RAVINDER KUMAR	SIRIYA CHAPRAN A	MALE	P	P	P	P	P	W	P	P	P	P	A	P	W	P	P	A	P	P	P	W	P	P	P	P	P	CL	W	P	P	P	P	25
15	379638	ABHAY KUMAR	BADARI NATH SINGH	MALE	P	PL	PL	W	PL	PL	PL	A	PL	PL	W	PL	PL	PL	PL	P	P	W	P	P	A	P	P	W	P	P	P	P	P	CL	CL	25
16	379698	BIRENDRA DHAMA	KIRAN SINGH DHAMA	MALE	P	P	P	P	W	A	P	P	A	P	P	W	P	P	P	P	A	P	W	P	P	P	A	A	P	W	P	P	P	P	P	22
17	599286	ABHIMANYU KUMAR JHA	BIRENDRA JHA	MALE	CL	P	A	P	P	A	W	P	P	P	P	P	P	W	P	P	CL	P	P	P	W	A	A	P	P	P	P	W	P	PL	PL	23
18	377384	SUNIL KUMAR	RAJ PAL SINGH	MALE	P	P	P	P	P	W	P	A	P	P	P	P	W	A	P	P	P	P	P	W	P	P	A	P	P	P	W	P	P	A	P	23
19	378418	DEEPAK KUMAR	SH RAJ KUMAR	MALE	P	A	W	P	A	P	P	P	P	W	P	P	P	P	CL	W	P	P	A	P	P	P	W	P	P	A	P	P	P	W	22	
20	378120	SITA DEVI	PAVENDER KUMAR	FEMALE	P	W	P	P	A	P	P	P	W	P	P	P	P	A	P	W	P	P	P	P	P	A	W	P	P	P	P	P	P	W	P	23
21	915334	DEEPAK KUMAR	BABARI LAL	MALE	P	A	W	P	P	P	P	P	A	W	P	P	P	P	P	A	W	CL	CL	P	P	P	P	W	P	P	A	P	P	P	W	22
22	631756	AJAY KUMAR	PAPPU SINGH	MALE	P	W	P	A	P	P	P	P	W	P	P	P	P	P	P	W	P	P	P	P	A	P	W	A	A	P	P	P	P	W	P	22







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

**Name & Address of Contractor :** G4S SECURE SOLUTIONS (INDIA) PVT.LTD., 49, Rani Jhansi Road, Opp. Jhandewalan Mata Mandir, New Delhi-110055

**Nature and Location of Work :** Security, Watch/Ward KEDAR NATH ROAD DARYAGANJ NEW DELHI

**Name & Address of Establishment In/ under which contract is carried on :** SHROFF S CHARITY EYE HOSPITAL KEDAR NATH ROAD DARYAGANJ NEW DELHI

**Name and Address of Principal employer :** SHROFF S CHARITY EYE HOSPITAL KEDAR NATH ROAD DARYAGANJ NEW DELHI

**For the month of :** Oct, 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	GPAI	Other Ded	Total Ded	Net Amount Paid	Account No	Bank Name	Signature
1	008870	SUBHASH CHAND KAUSHIK	HEAD GUARD	26	16606.00	16606.00	0.00	100.00	0.00	0.00	639.00	0.00	17345.00	1800.00	130.00	0.00	22.00	0.00	0.00	1952.00	15393.00	'10834632325	STATE BANK OF INDIA	Bank Transfer
2	009502	MAHIPAL SINGH	SUPERVISOR	26	20019.00	20019.00	0.00	100.00	0.00	0.00	12319.00	0.00	32438.00	1800.00	243.00	0.00	22.00	0.00	0.00	2065.00	30373.00	'503010267198	KOTAK MAHINDRA BANK	Bank Transfer
3	010932	SHRINIWAS SUKLA	HEAD GUARD	26	16606.00	16606.00	0.00	100.00	0.00	0.00	1916.00	0.00	18622.00	1800.00	139.00	0.00	22.00	0.00	0.00	1961.00	16661.00	'50041953293	INDIAN BANK	Bank Transfer
4	011488	SURENDRA PAL	SUPERVISOR	26	20110.00	20110.00	0.00	100.00	0.00	0.00	7735.00	0.00	27945.00	1800.00	209.00	0.00	22.00	0.00	2162.00	4193.00	23752.00	'264104000026257	IDBI BANK,DELHI	Bank Transfer
5	016170	ANIL KR SINGH	HEAD GUARD	26	16616.00	16616.00	0.00	100.00	0.00	0.00	2556.00	0.00	19272.00	1800.00	144.00	0.00	22.00	0.00	0.00	1966.00	17306.00	'5410465223	CITI BANK, DELHI	Bank Transfer
6	017160	DEEPAK LAL	HEAD GUARD	26	16606.00	16606.00	0.00	100.00	0.00	0.00	1916.00	0.00	18622.00	1800.00	139.00	0.00	22.00	0.00	0.00	1961.00	16661.00	'503010292522	KOTAK MAHINDRA BANK	Bank Transfer
7	235955	NARESH KUMAR	GUARD	26	16506.00	16506.00	0.00	100.00	0.00	0.00	1270.00	0.00	17876.00	1800.00	134.00	0.00	22.00	0.00	0.00	1956.00	15920.00	'264104000052650	IDBI BANK,DELHI	Bank Transfer
8	109860	VIJAY SINGH	GUARD	25	16506.00	15871.00	0.00	96.00	0.00	0.00	1270.00	0.00	17237.00	1800.00	129.00	0.00	22.00	0.00	0.00	1951.00	15286.00	'0192104000157261	IDBI BANK,DELHI	Bank Transfer
9	020970	MANOJ KUMAR	HEAD GUARD	22	16626.00	14068.00	0.00	85.00	0.00	0.00	4157.00	1279.00	19588.00	1688.00	147.00	0.00	22.00	0.00	0.00	1857.00	17731.00	'772210110008472	BANK OF INDIA	Bank Transfer
10	377303	PAWAN KUMAR	GUARD	26	16506.00	16506.00	0.00	100.00	0.00	0.00	1270.00	0.00	17876.00	1800.00	134.00	0.00	22.00	0.00	0.00	1956.00	15920.00	'264104000116503	IDBI BANK,DELHI	Bank Transfer
11	253102	AJAY KUMAR	GUARD	26	16506.00	16506.00	0.00	100.00	0.00	0.00	1905.00	0.00	18511.00	1800.00	139.00	0.00	22.00	0.00	0.00	1961.00	16550.00	'0192104000165686	IDBI BANK,DELHI	Bank Transfer
12	026240	SATENDRA KUMAR	HEAD GUARD	26	16566.00	16566.00	0.00	100.00	0.00	0.00	2549.00	0.00	19215.00	1800.00	144.00	0.00	22.00	0.00	0.00	1966.00	17249.00	'503010206063	KOTAK MAHINDRA BANK	Bank Transfer
13	025940	DEV RAJ	HEAD GUARD	26	16566.00	16566.00	0.00	100.00	0.00	0.00	1274.00	0.00	17940.00	1800.00	134.00	0.00	22.00	0.00	0.00	1956.00	15984.00	'36554313030	STATE BANK OF INDIA	Bank Transfer
14	026496	RAVINDER KUMAR	HEAD GUARD	26	16606.00	16606.00	0.00	100.00	0.00	0.00	1916.00	0.00	18622.00	1800.00	139.00	0.00	22.00	0.00	0.00	1961.00	16661.00	'503010159237	KOTAK MAHINDRA BANK	Bank Transfer
15	379638	ABHAY KUMAR	GUARD	26	16506.00	16506.00	0.00	100.00	0.00	0.00	2539.00	0.00	19145.00	1800.00	143.00	0.00	22.00	0.00	0.00	1965.00	17180.00	'0264104000197953	IDBI BANK,DELHI	Bank Transfer
16	379698	BIRENDRA DHAMA	GUARD	26	16506.00	16506.00	0.00	100.00	0.00	0.00	1270.00	0.00	17876.00	1800.00	134.00	0.00	22.00	0.00	0.00	1956.00	15920.00	'0264104000198622	IDBI BANK,DELHI	Bank Transfer
17	599286	ABHIMANYU KUMAR JHA	GUARD	26	16506.00	16506.00	0.00	100.00	0.00	0.00	1270.00	0.00	17876.00	1800.00	134.00	0.00	22.00	0.00	0.00	1956.00	15920.00	'0192104000182911	IDBI BANK,DELHI	Bank Transfer
18	377384	SUNIL KUMAR	GUARD	26	16506.00	16506.00	0.00	100.00	0.00	0.00	1270.00	0.00	17876.00	1800.00	134.00	0.00	22.00	0.00	0.00	1956.00	15920.00	'264104000131209	IDBI BANK,DELHI	Bank Transfer
19	378418	DEEPAK KUMAR	GUARD	26	16506.00	16506.00	0.00	100.00	0.00	0.00	1270.00	0.00	17876.00	1800.00	134.00	0.00	22.00	0.00	0.00	1956.00	15920.00	'50045841451	INDIAN BANK	Bank Transfer
20	378120	SITA DEVI	LADY GUARD	26	16506.00	16506.00	0.00	100.00	0.00	0.00	2539.00	0.00	19145.00	1800.00	143.00	0.00	22.00	0.00	0.00	1965.00	17180.00	'50039192059	INDIAN BANK	Bank Transfer
21	915334	DEEPAK KUMAR	GUARD	26	16506.00	16506.00	0.00	100.00	0.00	0.00	1905.00	0.00	18511.00	1800.00	139.00	0.00	22.00	0.00	0.00	1961.00	16550.00	'503010256378	KOTAK MAHINDRA BANK	Bank Transfer
22	631756	AJAY KUMAR	GUARD	25	16506.00	15871.00	0.00	96.00	0.00	0.00	635.00	0.00	16602.00	1800.00	124.00	0.00	22.00	0.00	0.00	1946.00	14656.00	'100024163542	INDUSIND Bank - New Delhi	Bank Transfer





Form XXIII  
Rule 78(1) (a)(iii)  
Register of Overtime

**Name & Address of Contractor:**  
G4S SECURE SOLUTIONS (INDIA) PVT.LTD., 49, Rani Jhansi Road, Opp. Jhandewalan Mata Mandir, New Delhi-110055 Security, Watch/Ward.

**Name & Address of Establishment In/ under which contract is carried on:**  
SHROFF S CHARITY EYE HOSPITAL  
KEDAR NATH ROAD DARYAGANJ NEW DELHI  
**Name and Address of Principal employer:**  
SHROFF S CHARITY EYE HOSPITAL  
**FOR THE MONTH OF**  
Oct, 2022

Sl.No	Name of workman	Father/Husband Name	Sex	Designation/nature of employment	Dates on which overtime worked	Total overtime worked or production in case of piece-rated	Normal rates of wages	Overtime rate of wages	Overtime rate earnings	Date on which overtime wages paid	Remarks
1	2	3	4	5	6	7	8	9	10	11	12
No OVER TIME paid to any employees in the current month Oct, 2022											





**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:**SHROFF S CHARITY EYE HOSPITAL

**Nature and Location of Work:**Security Services

**Name and Address of Principal employer:**SHROFF S CHARITY EYE HOSPITAL KEDAR NATH ROAD,DARYAGANJ,,NEW DELHI

**Month:**Oct, 2022

**Name of Workman:** SUBHASH CHAND KAUSHIK

**Father Name:** Ram Bhajan

**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	17345.00
6.	Deductions, if any	1952.00
7.	Net amount of wages paid	15393.00

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:**SHROFF S CHARITY EYE HOSPITAL

**Nature and Location of Work:**Security Services

**Name and Address of Principal employer:**SHROFF S CHARITY EYE HOSPITAL KEDAR NATH ROAD,DARYAGANJ,,NEW DELHI

**Month:**Oct, 2022

**Name of Workman:** MAHIPAL SINGH

**Father Name:** Girdhari Lal

**Designation:** SUPERVISOR

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	774.00
4.	Amount of overtime wages	NIL
5.	Gross wages payable	32438.00
6.	Deductions, if any	2065.00
7.	Net amount of wages paid	30373.00

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:**SHROFF S CHARITY EYE HOSPITAL

**Nature and Location of Work:**Security Services

**Name and Address of Principal employer:**SHROFF S CHARITY EYE HOSPITAL KEDAR NATH ROAD,DARYAGANJ,,NEW DELHI

**Month:**Oct, 2022

**Name of Workman:** SHRINIWAS SUKLA

**Father Name:** Late Shri Nagendra Shukla

**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	18622.00
6.	Deductions, if any	1961.00
7.	Net amount of wages paid	16661.00

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:**SHROFF S CHARITY EYE HOSPITAL

**Nature and Location of Work:**Security Services

**Name and Address of Principal employer:**SHROFF S CHARITY EYE HOSPITAL KEDAR NATH ROAD,DARYAGANJ,,NEW DELHI

**Month:**Oct, 2022

**Name of Workman:** SURENDRA PAL

**Father Name:** Late Chunni Lal

**Designation:** SUPERVISOR

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	777.00
4.	Amount of overtime wages	NIL
5.	Gross wages payable	27945.00
6.	Deductions, if any	4193.00
7.	Net amount of wages paid	23752.00

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:**SHROFF S CHARITY EYE HOSPITAL

**Nature and Location of Work:**Security Services

**Name and Address of Principal employer:**SHROFF S CHARITY EYE HOSPITAL KEDAR NATH ROAD,DARYAGANJ,,NEW DELHI

**Month:**Oct, 2022

**Name of Workman:** ANIL KR SINGH

**Father Name:** Lalta 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	19272.00
6.	Deductions, if any	1966.00
7.	Net amount of wages paid	17306.00

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:**SHROFF S CHARITY EYE HOSPITAL

**Nature and Location of Work:**Security Services

**Name and Address of Principal employer:**SHROFF S CHARITY EYE HOSPITAL KEDAR NATH ROAD,DARYAGANJ,,NEW DELHI

**Month:**Oct, 2022

**Name of Workman:** DEEPAK LAL

**Father Name:** Lt Sh Sohan Lal

**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	18622.00
6.	Deductions, if any	1961.00
7.	Net amount of wages paid	16661.00

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:**SHROFF S CHARITY EYE HOSPITAL

**Nature and Location of Work:**Security Services

**Name and Address of Principal employer:**SHROFF S CHARITY EYE HOSPITAL KEDAR NATH ROAD,DARYAGANJ,,NEW DELHI

**Month:**Oct, 2022

**Name of Workman:** MANOJ KUMAR

**Father Name:** Sh Abhayaram Singh

**Designation:** HEAD GUARD

1.	No. of Days Worked	22
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	19588.00
6.	Deductions, if any	1857.00
7.	Net amount of wages paid	17731.00

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:**SHROFF S CHARITY EYE HOSPITAL

**Nature and Location of Work:**Security Services

**Name and Address of Principal employer:**SHROFF S CHARITY EYE HOSPITAL KEDAR NATH ROAD,DARYAGANJ,,NEW DELHI

**Month:**Oct, 2022

**Name of Workman:** DEV RAJ

**Father Name:** Chedi Ram

**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	17940.00
6.	Deductions, if any	1956.00
7.	Net amount of wages paid	15984.00

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:**SHROFF S CHARITY EYE HOSPITAL

**Nature and Location of Work:**Security Services

**Name and Address of Principal employer:**SHROFF S CHARITY EYE HOSPITAL KEDAR NATH ROAD,DARYAGANJ,,NEW DELHI

**Month:**Oct, 2022

**Name of Workman:** SATENDRA KUMAR

**Father Name:** BALLU 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	19215.00
6.	Deductions, if any	1966.00
7.	Net amount of wages paid	17249.00

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:**SHROFF S CHARITY EYE HOSPITAL

**Nature and Location of Work:**Security Services

**Name and Address of Principal employer:**SHROFF S CHARITY EYE HOSPITAL KEDAR NATH ROAD,DARYAGANJ,,NEW DELHI

**Month:**Oct, 2022

**Name of Workman:** RAVINDER KUMAR

**Father Name:** SIRIYA CHAPRANA

**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	18622.00
6.	Deductions, if any	1961.00
7.	Net amount of wages paid	16661.00

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:**SHROFF S CHARITY EYE HOSPITAL

**Nature and Location of Work:**Security Services

**Name and Address of Principal employer:**SHROFF S CHARITY EYE HOSPITAL KEDAR NATH ROAD,DARYAGANJ,,NEW DELHI

**Month:**Oct, 2022

**Name of Workman:** VIJAY SINGH

**Father Name:** RAM KRIPAL

**Designation:** GUARD

1.	No. of Days Worked	25
2.	No. of units worked in case of piece-rate workers	NIL
3.	Rate of daily wages/piece-rate	639.00
4.	Amount of overtime wages	NIL
5.	Gross wages payable	17237.00
6.	Deductions, if any	1951.00
7.	Net amount of wages paid	15286.00

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:**SHROFF S CHARITY EYE HOSPITAL

**Nature and Location of Work:**Security Services

**Name and Address of Principal employer:**SHROFF S CHARITY EYE HOSPITAL KEDAR NATH ROAD,DARYAGANJ,,NEW DELHI

**Month:**Oct, 2022

**Name of Workman:** NARESH KUMAR

**Father Name:** JAGBIR SINGH

**Designation:** 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	639.00
4.	Amount of overtime wages	NIL
5.	Gross wages payable	17876.00
6.	Deductions, if any	1956.00
7.	Net amount of wages paid	15920.00

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:**SHROFF S CHARITY EYE HOSPITAL

**Nature and Location of Work:**Security Services

**Name and Address of Principal employer:**SHROFF S CHARITY EYE HOSPITAL KEDAR NATH ROAD,DARYAGANJ,,NEW DELHI

**Month:**Oct, 2022

**Name of Workman:** AJAY KUMAR

**Father Name:** IQBAL SINGH

**Designation:** 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	639.00
4.	Amount of overtime wages	NIL
5.	Gross wages payable	18511.00
6.	Deductions, if any	1961.00
7.	Net amount of wages paid	16550.00

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:**SHROFF S CHARITY EYE HOSPITAL

**Nature and Location of Work:**Security Services

**Name and Address of Principal employer:**SHROFF S CHARITY EYE HOSPITAL KEDAR NATH ROAD,DARYAGANJ,,NEW DELHI

**Month:**Oct, 2022

**Name of Workman:** PAWAN KUMAR

**Father Name:** RISI PAL SINGH

**Designation:** 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	639.00
4.	Amount of overtime wages	NIL
5.	Gross wages payable	17876.00
6.	Deductions, if any	1956.00
7.	Net amount of wages paid	15920.00

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:**SHROFF S CHARITY EYE HOSPITAL

**Nature and Location of Work:**Security Services

**Name and Address of Principal employer:**SHROFF S CHARITY EYE HOSPITAL KEDAR NATH ROAD,DARYAGANJ,,NEW DELHI

**Month:**Oct, 2022

**Name of Workman:** SUNIL KUMAR

**Father Name:** RAJ PAL SINGH

**Designation:** 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	639.00
4.	Amount of overtime wages	NIL
5.	Gross wages payable	17876.00
6.	Deductions, if any	1956.00
7.	Net amount of wages paid	15920.00

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:**SHROFF S CHARITY EYE HOSPITAL

**Nature and Location of Work:**Security Services

**Name and Address of Principal employer:**SHROFF S CHARITY EYE HOSPITAL KEDAR NATH ROAD,DARYAGANJ,,NEW DELHI

**Month:**Oct, 2022

**Name of Workman:** SITA DEVI

**Father Name:** PAVENDER KUMAR

**Designation:** LADY 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	639.00
4.	Amount of overtime wages	NIL
5.	Gross wages payable	19145.00
6.	Deductions, if any	1965.00
7.	Net amount of wages paid	17180.00

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:**SHROFF S CHARITY EYE HOSPITAL

**Nature and Location of Work:**Security Services

**Name and Address of Principal employer:**SHROFF S CHARITY EYE HOSPITAL KEDAR NATH ROAD,DARYAGANJ,,NEW DELHI

**Month:**Oct, 2022

**Name of Workman:** DEEPAK KUMAR

**Father Name:** SH RAJ KUMAR

**Designation:** 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	639.00
4.	Amount of overtime wages	NIL
5.	Gross wages payable	17876.00
6.	Deductions, if any	1956.00
7.	Net amount of wages paid	15920.00

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:**SHROFF S CHARITY EYE HOSPITAL

**Nature and Location of Work:**Security Services

**Name and Address of Principal employer:**SHROFF S CHARITY EYE HOSPITAL KEDAR NATH ROAD,DARYAGANJ,,NEW DELHI

**Month:**Oct, 2022

**Name of Workman:** ABHAY KUMAR

**Father Name:** BADARI NATH SINGH

**Designation:** 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	639.00
4.	Amount of overtime wages	NIL
5.	Gross wages payable	19145.00
6.	Deductions, if any	1965.00
7.	Net amount of wages paid	17180.00

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:**SHROFF S CHARITY EYE HOSPITAL

**Nature and Location of Work:**Security Services

**Name and Address of Principal employer:**SHROFF S CHARITY EYE HOSPITAL KEDAR NATH ROAD,DARYAGANJ,,NEW DELHI

**Month:**Oct, 2022

**Name of Workman:** BIRENDRA DHAMA

**Father Name:** KIRAN SINGH DHAMA

**Designation:** 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	639.00
4.	Amount of overtime wages	NIL
5.	Gross wages payable	17876.00
6.	Deductions, if any	1956.00
7.	Net amount of wages paid	15920.00

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:**SHROFF S CHARITY EYE HOSPITAL

**Nature and Location of Work:**Security Services

**Name and Address of Principal employer:**SHROFF S CHARITY EYE HOSPITAL KEDAR NATH ROAD,DARYAGANJ,,NEW DELHI

**Month:**Oct, 2022

**Name of Workman:** ABHIMANYU KUMAR JHA

**Father Name:** BIRENDRA JHA

**Designation:** 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	639.00
4.	Amount of overtime wages	NIL
5.	Gross wages payable	17876.00
6.	Deductions, if any	1956.00
7.	Net amount of wages paid	15920.00

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:**SHROFF S CHARITY EYE HOSPITAL

**Nature and Location of Work:**Security Services

**Name and Address of Principal employer:**SHROFF S CHARITY EYE HOSPITAL KEDAR NATH ROAD,DARYAGANJ,,NEW DELHI

**Month:**Oct, 2022

**Name of Workman:** AJAY KUMAR

**Father Name:** PAPPU SINGH

**Designation:** GUARD

1.	No. of Days Worked	25
2.	No. of units worked in case of piece-rate workers	NIL
3.	Rate of daily wages/piece-rate	639.00
4.	Amount of overtime wages	NIL
5.	Gross wages payable	16602.00
6.	Deductions, if any	1946.00
7.	Net amount of wages paid	14656.00

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:**SHROFF S CHARITY EYE HOSPITAL

**Nature and Location of Work:**Security Services

**Name and Address of Principal employer:**SHROFF S CHARITY EYE HOSPITAL KEDAR NATH ROAD,DARYAGANJ,,NEW DELHI

**Month:**Oct, 2022

**Name of Workman:** DEEPAK KUMAR

**Father Name:** BABARI LAL

**Designation:** 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	639.00
4.	Amount of overtime wages	NIL
5.	Gross wages payable	18511.00
6.	Deductions, if any	1961.00
7.	Net amount of wages paid	16550.00

Initials of the Contractor or his Representative





FORM XX ,See Rule- 78 (1) (a) (ii)  
REGISTER OF DEDUCTION FOR DAMAGE OR LOSS

**Name & Address of Contractor:**  
G4S SECURE SOLUTIONS (INDIA) PVT.LTD., 49, Rani Jhansi Road, Opp. Jhandewalan Mata Mandir, New Delhi-110055 Security, Watch/Ward.

**Name & Address of Establishment In/ under which contract is carried on:**  
SHROFF S CHARITY EYE HOSPITAL  
KEDAR NATH ROAD DARYAGANJ NEW DELHI  
**Name and Address of Principal employer:**  
SHROFF S CHARITY EYE HOSPITAL  
**FOR THE MONTH OF**  
Oct, 2022

Sl.No	Name of workman	Father/Husband Name	Nature of Employment/ Designation	Particulars of Damages or Loss	Date of Damage or Loss	Whether workman showed cause against deduction	Name of person in whose presence employees explanation was heard	Amount of deduction imposed	No. of Instalments	Date of First Instalments	Date of Last Instalments	Remarks
1	2	3	4	5	6	7	8	9	10	11	12	13
No deduction for damages & loss in the current month Oct, 2022												





FORM XXI  
Rule 78(1)a(ii)  
Register of Fines

**Name & Address of Contractor:**

G4S SECURE SOLUTIONS (INDIA) PVT.LTD., 49, Rani Jhansi Road, Opp. Jhandewalan Mata Mandir, New Delhi-110055 Security, Watch/Ward.

**Name & Address of Establishment In/ under which contract is carried on:**

SHROFF S CHARITY EYE HOSPITAL  
KEDAR NATH ROAD DARYAGANJ NEW DELHI

**Name and Address of Principal employer:**

SHROFF S CHARITY EYE HOSPITAL

**FOR THE MONTH OF**

Oct, 2022

Sl.No	Name of workman	Father/Husband Name	Designation/nature of employment	Act/Omission for which fine imposed	Date of offence	Whether workman showed cause against fine	Name of person in whose presence employee's explanation was heard	Wage periods and wages payable	Amount of fine imposed	Date on which fine realised	Remarks
1	2	3	4	5	6	7	8	9	10	11	12
No deduction for damages & loss in the current month Oct, 2022											





Form XXII  
Rule 78(1) (a)(ii)  
Register of Advances

**Name & Address of Contractor:**

G4S SECURE SOLUTIONS (INDIA) PVT.LTD., 49, Rani Jhansi Road, Opp. Jhandewalan Mata Mandir, New Delhi-110055 Security, Watch/Ward.

**Name & Address of Establishment In/ under which contract is carried on:**

SHROFF S CHARITY EYE HOSPITAL  
KEDAR NATH ROAD DARYAGANJ NEW DELHI

**Name and Address of Principal employer:**

SHROFF S CHARITY EYE HOSPITAL

**FOR THE MONTH OF**

Oct, 2022

Sl.No	Name	Father/Husband Name	Name of employment/Designation	Wage period and wage payable	Date and amount of advance given	Purpose(s) for which advance make	No. of instalments of which advance to be repaid	Date and amount of each instalment repaid	Date on which last instalment was repaid	Remarks
1	2	3	4	5	6	7	8	9	10	11
No Advance paid to any employees in the current month Oct, 2022										



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

	Name of Establishment		SHROFF S CHARITY EYE HOSPITAL, KEDAR NATH ROAD DARYAGANJ NEW DELHI		
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 : Oct, 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				

