

## MUSTER ROLL

Name and Address of Contractor : **DUOS BRAIN MANAGEMENT SUPPORT SERVICES**  
**A-40,Pochanur Extn, Gali No.1,Sector-23,Dwarka,**  
**New Delhi-110077.**

Name & Address of estt. in/under which contract is carried on: **BAANI CORPORATE ONE,JASOLA**

Name & Address of principal Employer :

Nature and location of work : Facade maintenance at BAANI CORPORATE ONE,JASOLA

FOR THE MONTH OF DEC '2017

Sl.No.	Name of Workman	Father's/Husband Name	Sex	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	TOTAL	Remarks
1	RAJ NARAYAN SHARMA	MD. RATAJ	M	P	P	W/O	P	P	P	P	P	P	W/O	P	P	P	P	P	P	W/O	P	P	P	P	P	P	W/O	H	P	P	P	P	P	W/O	31	
2	MANISH BHATT	KHILANAND BHATT	M	P	P	W/O	P	P	P	P	P	P	W/O	P	P	P	P	P	P	W/O	P	P	P	P	P	P	W/O	H	P	P	P	P	P	W/O	31	



# WAGES SLIP

FORM XIX

[see Rule 78(1)(b)]

For the month : MAR'2017

Sex and Identification : Male

Name and Address of Contractor :

**DUOS BRAIN MANAGEMENT SUPPORT SERVICES  
A-40,Pochanpur Extn., Gali No. 1  
Sector-23 Dwarka, New Delhi-110077**

Name & Address of estt. in/under which contract is carried on: **BAANI CORPORATE ONE,JASOLA**

Nature and location of work :

**Facade Maintenance at BAANI CORPORATE ONE**

Name & Address of Principal Employer :

**BAANI CORPORATE ONE,JASOLA**

Name and Father's/Husband's name of the workman :

**MD PARVEJ/MD RATAJ**

No of Days worked	Rate of wages	No of units worked in case of piece-rate workers	Dates on which overtime worked wages	Spl allowance	Gross wages payable	Deduction ,if any(EPF+E SI)	Actually wages paid	Signature of the contractor or his respresen tative
31	10582	0	0		11165	1270	9709	
						186		

Place : New Delhi

Date :

Signature of the Contractor

# WAGES SLIP

FORM XIX

[see Rule 78(1)(b)]

For the month : MAR'2017

Sex and Identification : Male

Name and Address of Contractor :

**DUOS BRAIN MANAGEMENT SUPPORT SERVICES  
A-40,Pochanpur Extn., Gali No. 1  
Sector-23 Dwarka, New Delhi-110077**

Name & Address of estt. in/under which contract is carried on: **BAANI CORPORATE ONE,JASOLA**

Nature and location of work :

**Facade Maintenance at BAANI CORPORATE ONE**

Name & Address of Principal Employer :

**BAANI CORPORATE ONE,JASOLA**

Name and Father's/Husband's name of the workman :

**MANISH BHATT/KHILANAND BHATT**

No of Days worked	Rate of wages	No of units worked in case of piece-rate workers	Dates on which overtime worked wages	Spl allowance	Gross wages payable	Deduction ,if any(EPF+E SI)	Actually wages paid	Signature of the contractor or his respresen tative
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