## **REGISTER OF WAGES**

FORM- XVII

(See Rule 78(a) (i

Name and Address of Contractor: DUOS BRAIN MANAGEMENT SUPPORT SERVICES

A-40,Pochanpur Extn, Gali No.1,Sector-23,Dwarka, New Delhi-110077.

Nature and location of work : Facade maintenance at ELEGANCE TOWER, JASOLA

Name & Address of Principal Emplyoyer :

Name & Address of estt. in/under which contract is carried on: ELEGANCE TOWER, JASOLA

ELEGANCE TOWER, JASOLA

Wage period : Monthly.....January'2014

s		Name of Workman	Mother's Name	EPF No	-	Designation/n ature of work done	No. of days worked	Rate of Wages			Amount of Wages Earned				Deduction,if any(indicate nature)				Total	Net Amount	Signature/Thumb	Date of
N		Father's Name		ESI No				Basic	HRA	Total	Basic Wages	HRA	Other cash payments(n ature of Arrears)	Total	LWF	ESI	EPF	ADVANCE/ TDS	deduction		impression of workmen	payment
1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	17	18	19	20	21	22	23
1	DB272	JAVED MOHD.	ASARBI	DL/38086/577		RAS	31	4920	3280	8200	4920	3280	0	8200	0	144	590	0	734	7466	4629520351340401	7/Feb/14
		RAFAYAT KHAN		2013255456																		
2	DB998	BAKIL	KAMRUNA	DL/38086/1212		CLEANER	31	4920	3280	8200	4920	3280	0	8200	0	144	590	0	734	7466	4629520356418756	7/Feb/14
		INAYAT ULLAH		2015156545																		

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