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.

Name & Address of estt. in/under which contract is carried on:**M/s MAX HOSPITAL,SAKET**

Name & Address of Principal Emplyoyer : **M/s MAX HOSPITAL,SAKET**

Nature and location of work : Facade maintenance at MAX HOSPITAL,Saket,New Delhi-110017.

Wage period : Monthly.....MAY'16

Sl No	Emp code	Name of Workman	Mother's Name	EPF No	Sl.No in the register of workman	Designation/nature of work done	No. of days worked	Rate of Wages			Amount of Wages Earned				Deduction,if any(indicate nature)				Total deduction	Net Amount Paid	Signature/Thumb impression of workmen	Date of payment
		Father's Name		ESI NO				Basic	HRA	Total	Basic Wages	HRA	Other cash payments(nature of Arrears)	Total	LWF	ESI	EPF	ADVANCE/ TDS				
1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	17	18	19	20	21	22	23
1	DB1403	AKASH SHRIVASTAVA	SHOBHA DEVI	DL/38086/1624		Supervisor	31	11154	0	11154	11154	0	0	11154	0	196	1338	0	1534	9620	4629520369126008	
		KRISHAN MURARI		1321414989																		
2	DB2294	AMIT	BAIDNATH	DL/38086/2472		RAS	28	10140	0	10140	9159	0	0	9159	0	161	1099	0	1260	7899	4629520369126305	
		BAIDNATH MANDAL		2015512783																		
3	DB1103	NOOR MOHAMMAD	JAMILA KHATUN	DL/38086/1315		CLEANER	22	9178	0	9178	6513	0	0	6513	0	114	782	0	896	5617	applied	
		MOHD SATTAR		2015242566																		
4	DB1661	NAVNEET KUMAR JHA	NANDINI JHA	DL/38086/1855		CLEANER	31	9178	0	9178	9178	0	0	9178	0	161	1101	0	1262	7916	applied	
		ANIL KUMAR JHA		2015600597																		