

# MUSTER ROLL

FORM XVI

[(See Rule 78(1)(a)(i)]

Name and Address of Contractor : **DUOS BRAIN MANAGEMENT SUPPORT SERVICES**  
*A-40 POCHANPUR EXTN GALI NO-1 DWARKA SECT-23 NEW DELHI-110077*

Name & Address of estt. in/under which contract is carried on: **MAX SMART SUPER SPECIALITY HOSPITAL SAKET**

Name & Address of principal Employer :MAX SMART SUPER SPECIALITY HOSPITAL SAKET  
 CITY,New Delhi-110017

Nature and location of work : Facade maintenance at MAX SMART SUPER SPECIALITY HOSPITAL SAKET CITY,New Delhi-110017.

FOR THE MONTH OF OCTOBER'2018

Sl.No.	Name of Workman	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	P	A	W/O	H	Total W/DAYS	Remarks
1	RAHUL MESSI	M	P	H	P	P	W/O	P	P	P	P	A	P	W/O	P	P	P	P	P	P	W/O	A	A	P	P	P	P	W/O	A	P	P	P	P	22	4	4	1	27	
2	YOGESHWAR RAO	M	P	H	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	P	P	P	P	P	26	0	4	1	31	
3	KULDDEP	M	P	H	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	W/O	P	P	P	P	P	26	0	4	1	31		
4	JITENDRA KUMAR	M	P	H	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	W/O	P	P	P	P	P	26	0	4	1	31		