MUSTER ROLL

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

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: THE LODHI HOTEL, NEW DELHI Name & Address of principal Employer :

THE LODHI HOTEL,NEW DELHI

Nature and location of work : Facade maintenance at THE LODHI HOTEL, NEW DELHI

For the Month of :JAN '2018

Sl.No	Name of Workman	EMPLOYEE ID	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	Р	w/o	А	н	TOTAL PAY DAY	Remarks
1	MOHIT SHARMA	DB1096	М	Р	Р	Р	Р	Р	P	w/0	Р	Р	Р	Р	Р	Р	W/0	Р	Р	Р	Р	Р	Р	W/0	Р	Р	Р	Р	Н	Р	W/0	Р	Р	Р	26	4	0	1	31	
2	DEVENDER	DB1914	М	Р	Р	Р	Р	Р	P	w/0	Р	Р	Р	Р	Р	Р	w/0	Р	Р	Р	Р	Р	Р	w/0	Р	Р	Р	Р	Н	Р	W/0	Р	Р	Р	26	4	0	1	31	
3	GOURAV	DB3325	М	Р	Р	Р	A	Р	P	W/0	Р	Р	А	Р	Р	Р	W/0	Р	Р	А	Р	Р	Р	w/0	Р	Р	А	Р	Н	Р	W/0	Р	Р	Р	22	4	4	1	27	
4	DILIP KUMAR RATHOR	DB1926	М	Р	Р	р	Р		P		Р	Р	Р	Р	Р		W/0		Р	Р	Р	р		W/0		Р	Р	Р	Н		w/0		Р	р	26	4	0	1	31	
	SURESH KUMAR	DB2130	M	Р	Р							A	A	A	A	A	A	A	A	A		A				A			A		A	A	A	A	6		24		7	
	RAJA	DB2130	M	P	P	-	-		P			Р	Р	P	P		W/0		P	Р	P	P		w/0		Р	P	Р	н		w/0		Р		26			1	31	
	RAKESH	DB2499	М	Р	Р	Р	A		P			Р	Р	А	Р		w/0		Р	Р	А	Р		w/0		Р	Р	Р	Н		w/0		Р		23			1	28	
8	BRIJESH PRATAP	DB3228	М	Р	Р	Р	Р	Р		W/0	Р	Р	Р	Р	Р		W/0		Р	Р	Р	Р		W/0		Р	Р	Р	Н		W/0		Р	Р	26	4	0	1	31	

REGISTER OF WAGES

LS XVII (See Rule 7{ Name & Address of estt. in/under which contract is carried on: THE Lodhi HOTEL

Name and Address of Contractor : DUOS BRAIN MANAGEMENT SUPPORT SERVICES

Name & Address of Principal Emplyoyer :

THE Lodhi HOTEL.NEV

Nature and location of work : Facade maintenance at THE Lodhi HOTEL,,NEW DELHI

		Name of Workman	EPF No				Ra	te of Wa	iges	An	nount of V	Vages Earne	d	Deduc	tion,if ar	y(indicat	e nature)				
SINo	Emp Code	Father' Name	ESI No	Sl.No in the register of workman	Designation /nature of work done		Basic	HRA	Total	Basic Wages	HRA	Other cash payments(nature of Arrears)	Total	LWF	ESI	EPF	ADVANCE/ TDS	Total deductio n	Net Amount Paid	Signature/Thum b impression of workmen	Initials of contractor or his respresent-ative
1	2	3	5	6	7	8	9	10	11	12	13	14	15	16	17	18	19	20	21	22	23
2	DB1926	DILIP KUMAR RATHOR	DL/38086/2113		RAS	30	10582	1100	11682	10582	1100	639	12321	0	216	1270	0	1486	10835	Cash/Cheque	7-Oct-2016
3	DB2130	SURESH KUMAR	DL/38086/2305		CLEANER	19	9568	900	10468	6060	570	0	6630	0	117	727	0	844	5786	Cash/Cheque	7-Oct-2016
4	DB1096	MOHIT SHARMA	DL/38086/1308		RAS	26	10582	1100	11682	9171	953	0	10124	0	178	1101	0	1279	8845	Cash/Cheque	7-Oct-2016
5	DB2135	RAVENDRA KUMAR	DL/38086/2310		CLEANER	30	9568	900	11368	9568	900	1047	11515	0	202	1148	0	1350	10165	Cash/Cheque	7-Oct-2016
6	DB2133	RAJA	DL/38086/2308		CLEANER	30	9568	900	10468	9568	900	349	10817	0	190	1148	0	1338	9479	Cash/Cheque	7-Oct-2016
7	DB2412	MOHIT SINGH	DL/38086/2609		CLEANER	30	9568	900	10468	9568	900	698	11166	0	196	1148	0	1344	9822	Cash/Cheque	7-Oct-2016

Wage period : Monthly...SEP'16

FORM-

FORM XIX

For the month : SEP'2016	
Sex and Identification :	Male

Name and Address of Contractor :

[see Rule 78(1)(b)]

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

Name & Address of estt. in/under which contract is carried on: THE LODHI HOTELL, NEW DELHI

Nature and location of work :

Name & Address of Principal Emplyoyer :

Facade Maintenance at THE LODHI HOTI

FORM XIX

THE LODHI HOTELL.NEW DELHI

SURESH KUMAR/RAM JIWAN

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

Date

No of Days worked	Rate of wages	No of units worked in case of piece-rate workers	which overtime	Spl allowance	Gross wages payable	Deduction,if any(EPF+ESI)	Actually wages paid	Signature of the contractor or his respresen tative
19	9568		0	0	6630	727	5786	
						117		

Place : New Delhi

Signature of the Contractor

WAGES SLIP

:

[see Rule 78(1)(b)] For the month : SEP'2016 Sex and Identification : Male **DUOS BRAIN MANAGEMENT SUPPORT 5** Name and Address of Contractor : A-40, Pochanpur Extn., Gali No. 1 Sector-23 Dwarka, New Delhi-110077 Name & Address of estt. in/under which contract is carried on: THE LODHI HOTELL, NEW DELHI Nature and location of work : Facade Maintenance at THE LODHI HOTI THE LODHI HOTEL, NEW DELHI Name & Address of Principal Emplyoyer : SANTOSH KUMAR RATH **DILIP KUMAR RATHOR/** DL/38086/2113 Name and Father's/Husband's name of the workman : 2015707152 No of Signature units of the Dates on No of Gross Deduction, if worked in Spl Actually contractor Rate of which Days wages any(EPF+ESI)/A wages case of allowance wages paid or his worked overtime payable DVANCE piece-rate respresen worked workers tative wages 30 10582 0 0 639 12321 1270 10835 216 0 : New Delhi Signature of the Contractor Place Date :

FORM XIX

For the month : SEP'2016 Sex and Identification : Male

Name and Address of Contractor :

[see Rule 78(1)(b)]

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

Name & Address of estt. in/under which contract is carried on: THE LODHI HOTELL, NEW DELHI

Nature and location of work :

Name & Address of Principal Emplyoyer :

Facade Maintenance at THE LODHI HOTI

FORM XIX

THE LODHI HOTEL, NEW DELHI

DEVENDDER'/BREJKISHOR

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

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+ESI) TDS	Actually wages paid	Signature of the contractor or his respresen tative
30	9568	0	0	0	11515	1148	10165	
						202		

 Place
 : New Delhi
 Date
 : Signature of the Contractor

WAGES SLIP

							[see Rule 78(1)(b)]
	onth : SEP'20							
Sex and Ide	entification	:	Male					
Name and	Address of	Contractor	:			DUOS BRAIN M/ A-40,Pochanpur Sector-23 Dwarl	Extn., Gali N	lo. 1
Name & Ao	ddress of es	tt. in/under	which cont	ract is carrie	d on: THE l	ODHI HOTELL, NI	EW DELHI	
Nature and	l location of	f work :				Facade Mainten	ance at THE	lodhi hoti
Name & Ao	ddress of Pr	incipal Emp	lyoyer :			THE LODHI HOT	EL, NEW DEL	HI
Name and	Father's/Hu	ısband's nar	ne of the w	orkman :		Mohit Sharma/	OMKAR S	HARMA
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+ESI) TDS	Actually wages paid	Signature of the contractor or his respresen tative
26	10582	0	0	0	10124	1101	8845	
						178		
						0		
Place	: New Delh	i	Date	:		Signature of the	Contractor	

FORM XIX

[see Rule 78(1)(b)]

For the month : SEP'2016 Sex and Identification :

Name and Address of Contractor :

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

Name & Address of estt. in/under which contract is carried on: THE LODHI HOTELL, NEW DELHI

Male

Nature and location of work :

Name & Address of Principal Emplyoyer :

Facade Maintenance at THE LODHI HOTI

THE LODHI HOTEL, NEW DELHI

RAVINDRA KUMAR

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

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+ESI) TDS	Actually wages paid	Signature of the contractor or his respresen tative
30	9568	0	0	1047	11515	1148	10165	
						202		

Place : New Delhi Date : Signature of the Contractor

WAGES SLIP

FORM XIX

[see Rule 78(1)(b)]

For the month : SEP'2016 Sex and Identification : Male

Name and Address of Contractor :

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

Name & Address of estt. in/under which contract is carried on: THE LODHI HOTELL, NEW DELHI

Nature and location of work :

Name & Address of Principal Emplyoyer :

Facade Maintenance at THE LODHI HOTI

THE LODHI HOTEL, NEW DELHI

RAJA/RAMOTAR

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

No of Days worked	Rate of wages	No of units worked in case of piece-rate workers	which overtime	Spl allowance	Gross wages payable	Deduction,if any(EPF+ESI) TDS	Actually wages paid	Signature of the contractor or his respresen tative
30	9568	0	0	349	10817	1148	9479	
						190		
	1	1	I	1		1	1	11

 Place
 : New Delhi
 Date
 : Signature of the Contractor

FORM XIX

[see Rule 78(1)(b)]

For the month : SEP'2016 Sex and Identification :

Male

Name and Address of Contractor :

DUOS BRAIN MANAGEMENT SUPPORT 5 A-40, Pochanpur Extn., Gali No. 1 Sector-23 Dwarka, New Delhi-110077

Name & Address of estt. in/under which contract is carried on: THE LODHI HOTELL, NEW DELHI

Nature and location of work :

Facade Maintenance at THE LODHI HOTI

THE LODHI HOTEL, NEW DELHI

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

Name & Address of Principal Emplyoyer :

Name and	Father's/Hu	isband's nar	ne of the w	orkman :		MOHIT SINGH		
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+ESI) TDS	Actually wages paid	Signature of the contractor or his respresen tative
30	9568	0	0	698	11166	1148	9822	
						196		
Place	: New Delh	ı	Date	:	I	Signature of the	Contractor	1