FORM XX Contract Labour (Reg. & Abo.) Central Rule, 1971 * KALKASTATIONERS Register of Deductions [See Rule 78(I)(a)(ii)] for Damage or Loss G-11, Nahyog Building 3 58, Nehru Place, N.D.-19 Ph.: 26440902, 26289845 Name and Address of Contractor Triveni Engy 4 Industries ltd.

Auy, Hoscing Complex, Norda UP. DELHI JAL BOARD, DELH Name & Address of estt. in/under which contract is carried on DELHI JAL BOARD. Name & Address of Principal Employer Nature and location of work Whether workman Name of person in whose Amount of **Particulars** Date of Date of recovery Designation/ Serial showed cause presence employee's Damage or deductions of damage Nature of Father's/Husband's Name First Name of workman Last Remarks against deduction explanation was heard Imposed or loss loss instalments Instalment Employment Instalment 11 13 020 JANUARY - 2020 depresed LON month the