

Register of Deductions

KALAKASTATIONERS
 C-11, Sahyog Building
 P.S. 58, Nehru Place, N.D.-110
 Ph.: 26440902, 26289845

Name and Address of Contractor **Tikoni Engineering & Industries Ltd.**
Aty Hosay Complex Nalda U.P.

Nature and location of work

Serial No.	Name of workman	Father's/Husband's Name	Designation/ Nature of Employment	Particulars of damage or loss	Date of Damage or loss
1	2	3	4	5	6

1 Nil Deduction for Losses & damage to

for Damage or Loss

Name & Address of estt. in/under which contract is carried on **Delti Sel Board**
Kondli Delhi

Name & Address of Principal Employer

Whether workman showed cause against deduction	Name of person in whose presence employee's explanation was heard	Amount of deductions imposed	No. of instalments	Date of recovery	Remarks
7	8	9	10	First Instalment 11 Last Instalment 12	13

All ob Employee for the Month of **Feb-2019**

