FORM XX

[See rule 78(1) (a) (ii)]

REGISTER OF DEDUCTIONS FOR DAMAGES OR LOSS

Name & address of the Contractor: GENIUS CONSULTANTS LIMITED, A-25, 2nd Floor, Mohan Co-operative Industrial Estate, New Delhi - 110 044

Name & address of establishment in/ under which contract is carried on : Cipla ltd.M2M,J.R.Complex No.5,HCMR Farms Village Mandoli ,Near Seva Dham delhi-1100933

Name and location of work: Cipla Ltd. New delhi

Name and Address of Principal Employer: Cipla ltd.M2M,J.R.Complex No.5,HCMR Farms Village Mandoli, Near Seva Dham delhi-110093

SI. No.	Name of workmen	Father's/ Husband's Name	Designation	Particulars of damage or loss		Whether workmen showed cause against deduction	Name of person in whose presence employee's explanation was heard	Amount deduction imposed	No. of installments	Date of recovery		Remarks
										First installment	Last installment	
			No Dedi	iction F	or Dam	ane or Loss	For the Month	of OCTORE	R - 2023			
			NO DCG		or Dain	age of Loss	or the Month	OI OO I OBL	11 - 2020			
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