

**FORM XX**

**[See Rule 78 (1) (a) (ii)]**

**Register of Deductions for Damage or Loss**

<b>Name and address of Contractor</b>	Adecco India Private Limited
<b>Name and address of Establishment in /under which contract is carried on</b>	CIPLA LTD NEAR USV GODOWN, ZIRAKPUR, PABHAT, PUNJAB, SAS NAGAR, 140603
<b>Nature and location of work</b>	NEAR USV GODOWN, ZIRAKPUR, PABHAT, PUNJAB, SAS NAGAR, 140603
<b>Name and address of Principal Employer</b>	CIPLA LTD NEAR USV GODOWN, ZIRAKPUR, PABHAT, PUNJAB, SAS NAGAR, 140603
<b>Month</b>	NOVEMBER            2022

[illegible]

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Sl. No.	Name of workman	Father's / Husband's	Designation	Particulars of damage / loss	Date of damage	Whether worker showed cause against deduction	Name of person in whose presence employee's explanation was heard	Amount of deduction imposed	No. of installments	Date of recovery		Remarks	Signature of the Contractor
										First installment	Last installment		
1	2	3	4	5	6	7	8	9	10	11	12	13	14

