Form A (See Rule (3)) Muster Roll Maternity Benefit Act. 1961 and (Mines & Circus) Rules. 1963

		1	he Maternity Ben	ent Act, 1961 and (I	Aines & Circus) Rules, 1963.			
Name and Address of the			CIPLA LTD					
Establishment			M2 A & M 1 -B J.R Complex No 5 HCMR Farms Mandoli, Delhi-93.					
Name	of the Contracto	r	Adecco India Private Limited					
					d, Opp Metro Pillar No 120,Karol Bagh, New Delhi-110005			
			ontwiring to werk,	57, 1501 1001,1 454 100	a, opp medo i mai no 120, karol bagi, new bolini 110005			
1	Serial Number		10					
2	Name and age of	f the woman	PUSHP LATA . EmpCode A49407					
-	and her father's							
	married, husban	id's) name	POM PRAKASH					
3	Date of appointr	nent	01/06/2012					
4	Nature of Work							
5	Dates with mon	th and year in w	hich she is employe	d, laid off and not o	employed			
5	Month	No. of Days	No.of days	No. of days not				
		Employed	laid off	Employed	Remarks			
	Jan-22	31.0	0.00	0.00				
	Feb-22	28.0	0.00	0.00				
	Mar-22	31.0	0.00	0.00				
	Apr-22	30.0	0.00	0.00				
	May-22 Jun-22							
	Jul-22 Jul-22							
	Aug-22							
	Sep-22							
	Oct-22							
	Nov-22							
6	Dec-22	aman giyas natia	e under section 6		Nil			
7	Date of discharg				Nil			
8	0		egnancy under sec	tion 6	Nil			
9	Date of birth of child				Nil			
10	Date of production of proof of delivery/ miscarriage/				Nil			
	-		y/ tubectomy/ oper		<u> </u>			
11 12	· · · · · · · · · · · · · · · · · · ·	<u> </u>	ness referred to in ty benefit paid in a		Nil			
12	of expected deliv	very			Nil			
13	Date with the an benefit	nount of subsequ	ent payment of ma	ternity	Nil			
14	Date with the an	nount of medical	bonus, if paid und	er section8	Nil			
15	under section 9	0	aid on account of l		Nil			
16	Date with the an	nount of wages p and period of lea	aid on account of l ave granted	leave	Nil			
17		•	y the woman under	r section6	Nil			
18			death, the name o					
	-	-	it and/or other am		Nil			
10	was paid, the amount thereof, and the date of paymentIf the woman dies and the child survives, the name of the							
19			aternity benefit wa		Nil			
	on behalf of the child and the period for which it was paid							
20	-		blishment authent	Nil				
21	the entries in the Remarks column		Ispector	pector Nil				
	21 Remarks column for the use of Inspector Nil Note * TF - Transfer From , TT - Transfer To , DOL - Date of Leaving Nil							



Form A (See Rule (3)) Muster Roll Maternity Benefit Act. 1961 and (Mines & Circus) Rules. 1963

I		ne Maternity Benefit Act, 1961 and (Mines & Circus) Rules, 1963.						
Name	e and Address of	the	CIPLA LTD					
Estab	olishment							
			M2 A & M 1 -B J.R Complex No 5 HCMR Farms Mandoli, Delhi-93.					
N	- f the Construction		Adagan India Duissa	4. T ::4. J				
Name	of the Contracto	r	Adecco India Priva	lie Limited				
			SAMYAK TOWER,	39, 1st Floor, Pusa Roa	d, Opp Metro Pillar No 120, Karol Bagh, New Delhi-110005			
	6 · 1 N 1							
1	Serial Number		25					
2	Name and age of	f the woman	MEENU ARORA . EmpCode A54182					
	and her father's	(or if						
	married, husbar	ıd's) name	GIAN CHAND					
-	D (1) (
3	Date of appointr	nent	01/06/2012					
4	Nature of Work							
· ·	mature of work							
5	Dates with mon	th and vear in w	nich she is employe	d, laid off and not o	employed			
~	Month	No. of Days	No.of days	No. of days not	mprojou			
	Month	Employed	laid off	Employed	Remarks			
	Jan-22	31.0						
			0.00	0.00				
	Feb-22	28.0	0.00	0.00				
	Mar-22	31.0	0.00	0.00				
	Apr-22	30.0	0.00	0.00				
	May-22							
	Jun-22							
	Jul-22							
	Aug-22							
	Sep-22							
	Oct-22							
	Nov-22							
	Dec-22							
6			e under section 6		Nil			
7	Date of discharge/dismissal, if any				Nil			
8	Date of producti	on of proof of pr	egnancy under sec	tion 6	Nil			
9	Date of birth of	child			Nil			
10	Date of production of proof of delivery/ miscarriage			e/	Nil			
10	[Medical termin	ation of pregnacy	y/ tubectomy/ oper	ation/				
11	Date of producti	on of proof of ill	ness referred to in	section 10	Nil			
12	Date with the an	nount of materni	ty benefit paid in a	dvance	Nil			
	of expected deliv	very			Nil			
13			ent payment of ma	ternity	Nül			
	benefit				Nil			
14	Date with the an	nount of medical	bonus, if paid und	er section8	Nil			
15			aid on account of					
	under section 9				Nil			
16	Date with the an	nount of wages p	aid on account of	eave	Nil			
	under section 10	and period of le	ave granted		IN11			
17	Name of the per	son nominated by	y the woman under	Nil				
18	If the woman die	es, the date of her	death, the name of	of the				
	person to whom	Maternity benef	it and/or other am	Nil				
	was paid, the an	nount thereof, an	d the date of paym	ent				
19	If the woman die	es and the child s	urvives, the name	of the				
	person to whom	the amount of M	aternity benefit wa	as paid	Nil			
	on behalf of the child and the period for which it was paid							
20	Signature of the	employer of esta	blishment authent	Nil				
-	the entries in the							
21	Remarks column				Nil			
Note	Note * TF - Transfer From , TT - Transfer To , DOL - Date of Leaving							



Form A (See Rule (3)) Muster Roll Maternity Benefit Act. 1961 and (Mines & Circus) Rules. 1963

			he Maternity Ben	ent Act, 1961 and (I	Aines & Circus) Rules, 1963.			
Name and Address of the Establishment			CIPLA LTD M2 A & M 1 -B J.R Complex No 5 HCMR Farms Mandoli, Delhi-93.					
Name	of the Contracto	r	Adecco India Private Limited					
			SAMYAK TOWER,	39, 1st Floor, Pusa Roa	d, Opp Metro Pillar No 120, Karol Bagh, New Delhi-110005			
			Sharring To were, 57, 1st ricer, rusa road, opp medio rinar ro 120, karor Bagi, rew Deim 110005					
1	Serial Number		46					
2	Name and age of		JASMEET KAUR . EmpCode C15289					
	and her father's married, husban		RAJWANT SINGH					
		-						
3	Date of appointr	nent	24/03/2014					
4	Nature of Work							
5	Dates with mon	th and year in w	hich she is emplove	d, laid off and not o	employed			
	Month	No. of Days	No.of days No. of days not		Remarks			
		Employed	laid off	Employed	incinai ks			
	Jan-22 Feb-22	31.0	0.00	0.00				
	Mar-22	28.0 31.0	0.00 0.00	0.00				
	Apr-22	30.0	0.00	0.00				
	May-22							
	Jun-22							
	Jul-22 Aug-22							
	Sep-22							
	Oct-22							
	Nov-22							
(Dec-22				Nil			
6 7	Date of discharg		e under section 6		Nil			
8	0		egnancy under sec	tion 6	Nil			
9	Date of birth of				Nil			
10	Date of production of proof of delivery/ miscarriage/ [Medical termination of pregnacy/ tubectomy/ operation/				Nil			
11	-		y/ tubectomy/ oper ness referred to in		Nil			
12	· · · · · · · · · · · · · · · · · · ·	-	ty benefit paid in a					
	of expected delivery				Nil			
13	benefit	-	ent payment of ma	-	Nil			
14			bonus, if paid und aid on account of l		Nil			
15	under section 9	01	baid on account of l		Nil			
16	under section 10	and period of le	ave granted		Nil			
17	-		y the woman under		Nil			
18			r death, the name o it and/or other am		Nil			
	was paid, the am	nount thereof, an	d the date of paym	ent				
19			urvives, the name					
	person to whom the amount of Maternity benefit was paid on behalf of the child and the period for which it was paid				Nil			
20					Nil			
	the entries in the	e muster-roll		2				
21 Note	Remarks columi * TE - Transfer F		1spector sfer To , DOL - Da	te of Leaving	Nil			
11010	II IIAHSIUI I	iving i i = iidlly		te or meaning				



Form A (See Rule (3)) Muster Roll The Maternity Benefit Act. 1961 and (Mines & Circus) Rules. 1963

		the Maternity Benefit Act, 1961 and (Mines & Circus) Rules, 1963.						
Nam	e and Address of	the	CIPLA LTD					
Estal	olishment		M2 A & M 1 - B I R Compley No - 5 HCMR Farms Mandoli Delhi-03					
			M2 A & M 1 -B J.R Complex No 5 HCMR Farms Mandoli, Delhi-93.					
Name	of the Contracto	r	Adecco India Priva	ate Limited				
1 14111	or the Contract							
			SAMYAK TOWER, 39, 1st Floor,Pusa Road, Opp Metro Pillar No 120,Karol Bagh, New Delhi-110005					
1	Serial Number		3					
	Name and age o	f the woman						
2	-		RAJNI RAWAT EmpCode F88015					
	and her father's (or if married, husband's) name		JAGMOHAN SINGH RAWAT					
3	Date of appoint	ment	11/06/2018					
4								
_	Datas	4h and	hich she is employed, laid off and not employed					
5	Dates with mor Month				mpioyea			
	Month	No. of Days	No.of days	No. of days not	Remarks			
<u> </u>		Employed	laid off	Employed				
	Jan-22	31.0	0.00	0.00				
	Feb-22	28.0	0.00	0.00				
	Mar-22	31.0	0.00	0.00				
	Apr-22	30.0	0.00	0.00				
	May-22							
	Jun-22							
	Jul-22							
	Aug-22							
	Sep-22							
	Oct-22							
	Nov-22							
	Dec-22							
6			ce under section 6		Nil			
7		ge/dismissal, if ar	•		Nil			
8	-	<u> </u>	egnancy under sec	tion 6	Nil			
9	Date of birth of				Nil			
10	-	-	livery/ miscarriage		Nil			
	-		y/ tubectomy/ oper		X 71			
11			ness referred to in		Nil			
12			ty benefit paid in a	dvance	Nil			
	of expected deli							
13		mount of subsequ	ent payment of ma	iternity	Nil			
	benefit		1		AT'1			
14			bonus, if paid und		Nil			
15	Date with the amount of wages paid on account of leave				Nil			
1/	under section 9 Date with the amount of wages paid on account of leave							
16		0 and period of le		Nil				
17			y the woman under	r section6	Nil			
18			r death, the name o					
			it and/or other am		Nil			
	was paid, the ar	nount thereof, an	d the date of paym	ent				
19	If the woman di	ies and the child s	survives, the name of the Iaternity benefit was paid		Nil			
	person to whom	the amount of M						
	on behalf of the child and the period for which it was paid							
20	-		blishment authent	Nil				
	the entries in th							
21 N. (in for the use of I		Nil				
Note	Note * TF - Transfer From , TT - Transfer To , DOL - Date of Leaving							

