

FORM XX		REGISTER OF DEDUCTIONS FOR DAMAGES OR LOSS										
[See rule 78(1) (a) (ii)]												
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.khasra no.1307-1310,Morta,Adjacent to vardhmanpuram police chowki,delhi meerut Road,Ghaziabad-201003 Name and location of work : cipla Ltd. GHAZIABAD,UTTAR PRADESH Name and Address of Principal Employer : Cipla ltd.khasra no.1307-1310,Morta,Adjacent to vardhmanpuram police chowki,delhi meerut Road,Ghaziabad-201003												
Sl. No.	Name of workmen	Father's/ Husband's Name	Designation	Particulars of damage or loss	Date 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 Deduction For Damage or Loss For the Month of JAN-22											

