FORM XX

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

REGISTER OF DEDUCTIONS FOR DAMAGES OR LOSS

Name & address of Contractor : Impressions Services (P) Ltd. WZ-8/7,Ist Floor, Phili Kothi, Kirti Nagar Industrial Area, New Delhi-110015

Name & address of establishment in/under which contract is carried on : JONES LANG LASALLE PROPERTY CONSULTANTS (INDIA) PRIVATE LIMITED

Nature and location of work : HOUSE KEEPING DELHI

Name and Address of Principal Employer : IBM INDIA (P) LTD. BIRLA TOWER_NEW DELHI 1ST FLOOR 25, BARAKHAMBA ROAD CONNAUGHT PALACE NEW DELHI

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 explanatio	Amount deduction imposed	No. of installments	Date of recovery		Remarks
										First installment	Last installment	

NO DEDUCTIONS FOR DAMAGES OR LOSS FOR THE MONTH OF FEB 2019

Compliance Checked
Date : 26/3/19
Name : CHETAN KUMAR
Signature : Chetan
Jones Lang LaSalle Property Consultants (India) Pvt. Ltd.

IMPRESSIONS SERVICES (P) LTD. NEW DELHI

FORM XXII

REGISTER OF ADVANCES

[See Rule 78(i)(a)(ii)]

Name & address of Contractor : Impressions Services (P) Ltd. WZ-8/7,Ist Floor, Phili Kothi, Kirti Nagar Industrial Area, New Delhi-110015

Name & address of establishment in/under which contract is carried on : JONES LANG LASALLE PROPERTY CONSULTANTS (INDIA) PRIVATE LIMITED

Nature and location of work : HOUSE KEEPING DELHI

Name and Address of Principal Employer : IBM INDIA (P) LTD. BIRLA TOWER_NEW DELHI 1ST FLOOR 25, BARAKHAMBA ROAD CONNAUGHT PALACE NEW DELHI

Sl. No.	Name of workmen	Father's/ Husband's Name	Nature of Employment	Earnings during a wage period	Date and amount of advance	Purpose (s) for which advance made	No of installments by which advance to be repair	Amount of Installment repaid with date of postponement granted	Date on which total amount paid	Signature or thumb impression of the worker

NO ADVANCE DURING THE MONTH OF FEB-2019

Compliance Checked
Date : 26/3/19
Name : CHETAN KULAR
Signature :
Jones Lang LaSalle Property Consultants (India) Pvt. Ltd.

FORM XXI

REGISTER OF FINES

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

Name & address of Contractor : Impressions Services (P) Ltd. WZ-8/7,Ist Floor, Phili Kothi, Kirti Nagar Industrial Area, New Delhi-110015

Name & address of establishment in/under which contract is carried on : JONES LANG LASALLE PROPERTY CONSULTANTS (INDIA) PRIVATE LIMITED

Nature and location of work : HOUSE KEEPING NOIDA

Name and Address of Principal Employer : IBM INDIA (P) LTD. BIRLA TOWER_NEW DELHI 1ST FLOOR 25, BARAKHAMBA ROAD CONNAUGHT PALACE NEW DELHI

Sl. No.	Name of workmen	Father's/ Husband's Name	Designation	Act/ Ommission for which fine imposed	Date of Offence	Whether Employee showed cause against fine	Name of person in whose presence employee's explanation was heard(in case of contractors)	Rate of Wages	Amount of fine imposed	Date on which fine realized	Remarks

NO FINES DURING THE MONTH OF FEB-2019

IMPRESSIONS SERVICES (P) LTD. NEW DELHI

Compliance Checked
Date : 26/3/19
Name : CHANDAN KUMAR
Signature :
Jones Lang LaSalle Property Consultants (India) Pvt. Ltd.

FORM XXIII

REGISTER OF OVERTIME

[See Rule 77(1)(a)(ii)]

Name & address of Contractor :Impressions Services (P) Ltd. WZ-8/7,Ist Floor, Phili Kothi, Kirti Nagar Industrial Area, New Delhi-110015

Name & address of establishment in/under which contract is carried on : : JONES LANG LASALLE PROPERTY CONSULTANTS (INDIA) PRIVATE LIMITED

Nature and location of work : HOUSE KEEPING DELHI

Name and Address of Principal Employer : IBM INDIA (P) LTD. BIRLA TOWER_NEW DELHI 1ST FLOOR 25, BARAKHAMBA ROAD CONNAUGHT PALACE NEW DELHI

S.No.	Name of workmen	Father's/ Husband's Name	Sex	Designation and Department	Date on which O.T. work was put on	Wages on O.T. on each occasion	Total O.T. worked or production in case of piece-rated	Normal Hour	Normal rate	O.T. rate	Normal earning	O.T. earning	Total earning	Date on which overtime O.T. payment made

NO OVERTIME FOR THE MONTH OF FEB- 2019

IMPRESSIONS SERVICES (P) LTD

Compliance Checked
Date : 26/3/19
Name : CHETAN KUMAR
Signature : Chetan
Jones Lang LaSalle Property Co (India) Pvt. Ltd.

FORM -15

[Regulation - 66]

ACCIDENT BOOK

(Employee's State Insurance Corporation)

Name & address of Contractor :Impressions Services (P) Ltd. WZ-8/7,Ist Floor, Phili Kothi, Kirti Nagar Industrial Area, New Delhi-110015

Name & address of establishment in/under which contract is carried on : JONES LANG LASALLE PROPERTY CONSULTANTS (INDIA) PRIVATE LIMITED

Nature and location of work : HOUSE KEEPING DELHI

Name and Address of Principal Employer : IBM INDIA (P) LTD. BIRLA TOWER_NEW DELHI 1ST FLOOR 25, BARAKHAMBA ROAD CONNAUGHT PALACE NEW DELHI

Sl. No.	Date of Notice	Time of Notice	Name & Address of the injured person	Sex	Age	Insurance No	Shift, Department & Occupation of the Employee	INJURY						Name, Occupation, address & sign. or the thump impression of the person giving notice	Signature & designation of the person who makes the entry	Name, address & occupation of two witnesses	Remarks if any
								Date	Time	Place	Cause of injury	Nature of injury	What exactly was the injured person doing at the time of injury				

NO ACCIDENT DURING THE MONTH OF FEB 2019

Compliance Checked
Date : 26/3/19
Name : CHETAN KUMAR
Signature :
Jones Lang LaSalle Property Consultants (India) Pvt. Ltd.