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FORM XXII

**REGISTER OF ADVANCES**

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

Name &amp; address of Contractor : Impressions Services (P) Ltd. WZ-8/7, 1st Floor, Peeli Kothi, Kirti Nagar Industrial Area, New Delhi-110015

Name &amp; address of establishment in/under which contract is carried on : CADDIE HOTEL (P) LTD. DIAL PULLMAN &amp; NOVOTEL HOTEL Asset No. 2, Delhi Aerocity, GMR Hospitality District, Indira Gandhi International Airport, New Delhi - 110037,

Nature and location of work : HOUSE KEEPING (NEW DELHI)

Name and Address of Principal Employer : CADDIE HOTEL (P) LTD. DIAL PULLMAN &amp; NOVOTEL HOTEL Asset No. 2, Delhi Aerocity, GMR Hospitality District, Indira Gandhi International Airport, New Delhi - 110037,

Sl. No.	Name of workman	Father's/ Husband's Name	Nature of Employment	Earnings during a wage period	Date of advances	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 post- ponement granted	Date on which total amount paid	REMARK	Signature or thumb impression of the worker
		<b>NO ADVANCES FOR THE MONTH OF DEC-2022</b>										



FORM XX		REGISTER OF DEDUCTIONS FOR DAMAGES OR LOSS										
[See Rule 78(1)(a)(ii)]												
Name & address of Contractor : Impressions Services (P) Ltd. WZ-8/7,1st Floor, Peeli Kothi, Kirti Nagar Industrial Area, New Delhi-110015												
Name & address of establishment in/under which contract is carried on : JACKSONS DEVELOPERS PRIVATE LIMITED												
Nature and location of work : HOUSEKEEPING -(DELHI)												
Name and Address of Principal Employer : CROWNE PLAZA ROHINI_CAFETARIA HOTEL CROWN PLAZA, PLOT NO.3B 1, TWIN DISTRICT CENTRE SECTOR-10, ROHINI												
Sl. No.	Name of workman	Father's/ Husband's Name	Designation	Particulars of damage or loss	Date of damage or loss	Whether workman showed cause against deduction	Name of person in whose presence employee's explanation was heard	Amount deduction imposed	No. of installment s	Date of recovery First installmen t Last installm ent		Remarks
	NO DEDUCTIONS FOR DAMAGES OR LOSS FOR THE MONTH OF DEC 2022											



**FORM XXI**

## REGISTER OF FINES

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

**Name & address of Contractor : Impressions Services (P) Ltd. WZ-8/7,1st Floor, Peeli Kothi, Kirti Nagar Industrial Area, New Delhi-110015**

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Name & address of establishment in/under which contract is carried on :JACKSONS DEVELOPERS PRIVATE LIMITED

Nature and location of work : HOUSE KEEPING -(DELHI)

Name and Address of Principal Employer :CROWNE PLAZA ROHINI\_CAFETARIA HOTEL CROWN PLAZA, PLOT NO.3B 1, TWIN DISTRICT CENTRE SECTOR-10, ROHINI

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**FORM XXIII**

# REGISTER OF OVERTIME

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

**Name & address of Contractor :Impressions Services (P) Ltd. WZ-8/7,1st Floor, Peeli Kothi, Kirti Nagar Industrial Area, New Delhi-110015**

**Name & address of establishment in/under which contract is carried on : JACKSONS DEVELOPERS PRIVATE LIMITED**

**Nature and location of work : HOUSE KEEPING -(DELHI)**

**Name and Address of Principal Employer : CROWNE PLAZA ROHINI\_CAFETERIA HOTEL CROWN PLAZA, PLOT NO.3B 1, TWIN DISTRICT CENTRE SECTOR-10, ROHINI**

S.No.	Name of workman	Father's/ Husband's Name	Sex	Designatio n and Departmen t	Date on which Overtime work was put on	Wages on Overtimeo n each occasion	Total Overtime worked or production in case of piece- rated	Normal Hour	Normal rate	Overtime rate	Normal earning	Overtim e earning	Total earning	Date on which overtime payment made
		<b>NO OVERTIME FOR THE MONTH OF DEC_2022</b>												

