

Form-XIV (see Rule 76) Employment Card

Name & Address of Contractor:

G4S Secure Solutions India Private Limited 49, Rani Jhansi Road, Opp. Jhandewalan Mata Mandir, New Delhi -110055

Nature and Location of work:

Security & Services MangolpuriHub_DEL (MundkaHub_DEL) Crimson Financial Services Pvt Ltd,MangolpuriHub_DEL (MundkaHub_DEL) Crimson Financial Services Pvt Ltd,MangolpuriHub_DEL (MundkaHub_DEL) Crimson Financial Services Pvt Ltd,NEW DELHI Name and address of establishment in / under which contract is caried on :

InstaKart Services Private Limited MangolpuriHub_DEL (MundkaHub_DEL) Crimson Financial Services Pvt Ltd,MangolpuriHub_DEL (MundkaHub_DEL) Crimson Financial Services Pvt Ltd,MangolpuriHub_DEL (MundkaHub_DEL) Crimson Financial Services Pvt Ltd,NEW DELHI

Name and address of Principal Employer :

InstaKart Services Private Limited

1	Name of the workman and address	PREMCHAND KUMAR
2	S.No. in the register of workman employed	
3	Nature of employment / designation	SUPERVISOR
4	Wages rate (with particularly of unit in case of piece work)	19573.00
5	Wage period	Monthly
6	Tenure of Employment	22-11-1991
7	Remarks	



Signature of the Contractor



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G4S Secure Solutions India Private Limited 49, Rani Jhansi Road, Opp. Jhandewalan Mata Mandir, New Delhi -110055

Nature and Location of work:

Security & Services MangolpuriHub_DEL (MundkaHub_DEL) Crimson Financial Services Pvt Ltd,MangolpuriHub_DEL (MundkaHub_DEL) Crimson Financial Services Pvt Ltd,MangolpuriHub_DEL (MundkaHub_DEL) Crimson Financial Services Pvt Ltd,NEW DELHI Name and address of establishment in / under which contract is caried on :

InstaKart Services Private Limited MangolpuriHub_DEL (MundkaHub_DEL) Crimson Financial Services Pvt Ltd,MangolpuriHub_DEL (MundkaHub_DEL) Crimson Financial Services Pvt Ltd,MangolpuriHub_DEL (MundkaHub_DEL) Crimson Financial Services Pvt Ltd,NEW DELHI

Name and address of Principal Employer :

InstaKart Services Private Limited

1	Name of the workman and address	KARAMVIR
2	S.No. in the register of workman employed	
3	Nature of employment / designation	HEAD GUARD
4	Wages rate (with particularly of unit in case of piece work)	16224.00
5	Wage period	Monthly
6	Tenure of Employment	05-06-2003
7	Remarks	



Signature of the Contractor



MUSTER ROLL Rule 78(1)(a)(i) Form XVI

Name & Address of Contractor : G4S SECURE SOLUTIONS (INDIA) PVT.LTD., 49, Rani Jhansi Road, Opp. Jhandewalan Mata Mandir, New Delhi-110055

Nature and Location of Work : Security Services, Watch/Ward MangolpuriHub_DEL (MundkaHub_DEL) Crimson Financial Services Pvt Ltd MangolpuriHub_DEL (MundkaHub_DEL) Crimson Financial Services Pvt Ltd MangolpuriHub_DEL (MundkaHub_DEL) Crimson Financial Services Pvt Ltd NEW DELHI

Name & Address of Establishment In/ under which contract is carried on : InstaKart Services Private Limited MangolpuriHub_DEL (MundkaHub_DEL) Crimson Financial Services Pvt Ltd MangolpuriHub_DEL (MundkaHub_DEL) Crimson Financial Services Pvt Ltd MangolpuriHub_DEL (MundkaHub_DEL) Crimson Financial Services Pvt Ltd NEW DELHI

Name and Address of Prinicipal employer : InstaKart Services Private Limited MangolpuriHub_DEL (MundkaHub_DEL) Crimson Financial Services Pvt Ltd MangolpuriHub_DEL (MundkaHub_DEL) Crimson Financial Services Pvt Ltd MangolpuriHub_DEL (MundkaHub_DEL) Crimson Financial Services Pvt Ltd NEW DELHI For the month of : Apr, 2022

SI No.	Clock NO.	Name	Father Name	Gender	1 2	3	4 5	5 G	6 7	8	9	10	11	12 1	13	4	5 1	6 1	7 1	18 1	9 2	20 2	21	22	23	24	25	26	27	28	29	30	Present Days
1	1324	PREMCHAND KUMAR	Tulsi Saw	MALE	A A	Ρ	A A	۸	٩A	A	A	Ρ	A	A	A	A	A	A A	1	P	A /	Α.	A	A	CL	А	А	Ρ	А	A	А	CL	6
2	25648	KARAMVIR	ANUP SINGH RANA	MALE	ΡP	A	ΡV	۷P	P	Ρ	Ρ	A	Ρ	W	ΡI	ΡI	ΡI	PF)	A۱	N	P	Р	Ρ	Ρ	Ρ	Ρ	W	Ρ	Ρ	Ρ	Ρ	23





REGISTER OF WAGES Form XVII Rule 78(1)(a)(i)

Name & Address of Contractor : G4S SECURE SOLUTIONS (INDIA) PVT.LTD., 49, Rani Jhansi Road, Opp. Jhandewalan Mata Mandir, New Delhi-110055

Nature and Location of Work : Security, Watch/Ward MangolpuriHub_DEL (MundkaHub_DEL) Crimson Financial Services Pvt Ltd MangolpuriHub_DEL (MundkaHub_DEL) Crimson Financial Services Pvt Ltd MangolpuriHub_DEL (MundkaHub_DEL) Crimson Financial Services Pvt Ltd New DELHI

Name & Address of Establishment In/ under which contract is carried on : InstaKart Services Private Limited MangolpuriHub_DEL (MundkaHub_DEL) Crimson Financial Services Pvt Ltd New DELHI

Name and Address of Prinicipal employer : InstaKart Services Private Limited MangolpuriHub_DEL (MundkaHub_DEL) Crimson Financial Services Pvt Ltd NEW DELHI
For the month of : Apr, 2022

SNo.	Emp Code	Employee Name	Designation	Attd (in days)	Monthly rate of wages/piece rate	BASIC	VDA	WA A	Arrear	Site Allow	Other Allow	OT/NFH	Total	PF ES	LW	VDD	GPAI	Other Ded	Total Ded	Net Amount Paid	Account No	Bank Name	Signature
1	1324	PREMCHAND KUMAR	SUPERVISOR	23	19473	17226	0	88	0	0	0	0	17315	1800 13	0 0	25	0	3016	4971	12344	'503010271852	KOTAK MAHINDRA BANK	Bank Transfer
2	25648	KARAMVIR	HEAD GUARD	26	16124	16124	0	100	0	0	0	0	16224	1800 12	1 0	25	0	0	1946	14278	'3008101009625	CANARA BANK	Bank Transfer





Form XXIII Rule 78(1) (a)(iii) Register of Overtime

Name & Address of Contractor:

G4S SECURE SOLUTIONS (INDIA) PVT.LTD., 49, Rani Jhansi Road, Opp. Jhandewalan Mata Mandir, New Delhi-110055 Security, Watch/Ward.

Name & Address of Establishment In/ under which contract is carried on:

InstaKart Services Private Limited MangolpuriHub_DEL (MundkaHub_DEL) Crimson Financial Services Pvt Ltd MangolpuriHub_DEL (MundkaHub_DEL) Crimson Financial Services Pvt Ltd MangolpuriHub_DEL (MundkaHub_DEL) Crimson Financial Services Pvt Ltd NEW DELHI Name and Address of Prinicipal employer: InstaKart Services Private Limited FOR THE MONTH OF

SI.No	Name of workman	Father/Husband Name	Sex	Designation/natu re of employment	Dates on which overtime worked	Total overtime worked or production in case of piece- rated	Normal rates of wages	Overtime rate of wages	Overtime rate earnings	Date on which overtime wages paid	Remarks
1	2	3	4	5	6	7	8	9	10	11	12
	!			No OVER TIME	paid to any employ	rees in the current	month Apr, 2022				
110 * 645	1	1		1	1		1	1		1	





FORM XIX See Rule 78(1) (b) Wage Slip

Name & Address of Contractor:G4S Secure Solution (India) Pvt.Ltd

Name & Address of Establishment In/ under which contract is carried on: InstaKart Services Private Limited

Nature and Location of Work: Security Services

Name and Address of Prinicipal employer:InstaKart Services Private Limited MangolpuriHub_DEL (MundkaHub_DEL) Crimson Financial Services Pvt Ltd,MangolpuriHub_DEL (MundkaHub_DEL) Crims

Month:Apr, 2022

Name of Workman: PREMCHAND KUMAR Father Name: Tulsi Saw Designation: SUPERVISOR

1.	No. of Days Worked	23
2.	No. of units worked in case of piece-rate workers	NIL
3.	Rate of daily wages/piece-rate	753.00
4.	Amount of overtime wages	NIL
5.	Gross wages payable	17315.00
6.	Deductions, if any	4971.00
7.	Net amount of wages paid	12344.00



Initials of the Contractor or his Representative



FORM XIX See Rule 78(1) (b) Wage Slip

Name & Address of Contractor: G4S Secure Solution (India) Pvt.Ltd

Name & Address of Establishment In/ under which contract is carried on: InstaKart Services Private Limited

Nature and Location of Work: Security Services

Name and Address of Prinicipal employer:InstaKart Services Private Limited MangolpuriHub_DEL (MundkaHub_DEL) Crimson Financial Services Pvt Ltd,MangolpuriHub_DEL (MundkaHub_DEL) Crims

Month:Apr, 2022

Name of Workman: KARAMVIR Father Name: ANUP SINGH RANA

Designation: HEAD GUARD

1.	No. of Days Worked	26
2.	No. of units worked in case of piece-rate workers	NIL
3.	Rate of daily wages/piece-rate	624.00
4.	Amount of overtime wages	NIL
5.	Gross wages payable	16224.00
6.	Deductions, if any	1946.00
7.	Net amount of wages paid	14278.00



Initials of the Contractor or his Representative



FORM XX ,See Rule- 78 (1) (a) (ii) REGISTER OF DEDUCTION FOR DAMAGE OR LOSS

Name & Address of Contractor:

G4S SECURE SOLUTIONS (INDIA) PVT.LTD., 49, Rani Jhansi Road, Opp. Jhandewalan Mata Mandir, New Delhi-110055 Security, Watch/Ward.

Name & Address of Establishment In/ under which contract is carried on: InstaKart Services Private Limited

MangolpuriHub_DEL (MundkaHub_DEL) Crimson Financial Services Pvt Ltd MangolpuriHub_DEL (MundkaHub_DEL) Crimson Financial Services Pvt Ltd MangolpuriHub_DEL (MundkaHub_DEL) Crimson Financial Services Pvt Ltd NEW DELHI **Name and Address of Prinicipal employer:** InstaKart Services Private Limited

FOR THE MONTH OF

SI.No	Name of workman	Father/Husban d Name	Nature of Employment/ Designation	Particulars of Damages or Loss	Date of Damage or Loss	Whether workman showed cause against deduction	Name of person in whose presence employees explanation was heard	Amount of deduction imposed	No. of Instalments	Date of First Instalments	Date of Last Instalments	Remarks
1	2	3	4	5	6	7	8	9	10	11	12	13
				No dec	luction for dama	ges & loss in the o	current month Ap	r, 2022				





FORM XXI Rule 78(1)a(ii) Register of Fines

Name & Address of Contractor:

G4S SECURE SOLUTIONS (INDIA) PVT.LTD., 49, Rani Jhansi Road, Opp. Jhandewalan Mata Mandir, New Delhi-110055 Security, Watch/Ward.

Name & Address of Establishment In/ under which contract is carried on:

InstaKart Services Private Limited MangolpuriHub_DEL (MundkaHub_DEL) Crimson Financial Services Pvt Ltd MangolpuriHub_DEL (MundkaHub_DEL) Crimson Financial Services Pvt Ltd MangolpuriHub_DEL (MundkaHub_DEL) Crimson Financial Services Pvt Ltd NEW DELHI Name and Address of Prinicipal employer: InstaKart Services Private Limited FOR THE MONTH OF

SI.No	Name of workman	Father/Husband Name	Designation/natu re of employment	Act/Omission for which fine imposed	Date of offence	Whether workman showed cause against fine	Name of person in whose presence employee's explanation was heard	Wage periods and wages payable	Amount of fine imposed	Date on which fine realised	Remarks
1	2	3	4	5	6	7	8	9	10	11	12
				No deduction	for damages & los	s in the current mo	onth Apr, 2022				
J.a. * Gro											





Form XXII Rule 78(1) (a)(ii) Register of Advances

Name & Address of Contractor:

G4S SECURE SOLUTIONS (INDIA) PVT.LTD., 49, Rani Jhansi Road, Opp. Jhandewalan Mata Mandir, New Delhi-110055 Security, Watch/Ward.

Name & Address of Establishment In/ under which contract is carried on: InstaKart Services Private Limited MangolpuriHub_DEL (MundkaHub_DEL) Crimson Financial Services Pvt Ltd MangolpuriHub_DEL (MundkaHub_DEL) Crimson Financial Services Pvt Ltd MangolpuriHub_DEL (MundkaHub_DEL) Crimson Financial Services Pvt Ltd NEW DELHI Name and Address of Prinicipal employer: InstaKart Services Private Limited FOR THE MONTH OF

SI.No	Name	Father/Husband Name	Name of employment/Desig nation	Wage period and wage payable	Date and amount of advance given	Purpose(s) for which advance make	No. of instalments of which advance to be repaid	Date and amount of each instalment repaid	Date on which last instalment was repaid	Remarks
1	2	3	4	5	6	7	8	9	10	11
			No	Advance paid to any	employees in the c	urrent month Apr. 2	022			
						an one monar rapi, z				
10. * 6										



		For (See F			
	Mi	uster Roll (Matern	•	51)	
		ame of Establishme		InstaKart Service Mangolpu (MundkaHub_DEL Services Pvt Ltd M (MundkaHub_DEL Services Pvt Ltd M (MundkaHub_DEL	es Private Limited, riHub_DEL) Crimson Financial angolpuriHub_DEL) Crimson Financial angolpuriHub_DEL) Crimson Financial td NEW DELHI
1		Serial Number			
2	Name of the w	oman and her Fathe Husband Name	er or if married,	NO CASE	INVOLVED
3	[[Date of Appointmen	t		
4		Nature of work			
5		and year in which sh off and not employed			
	Month	No. of days	No. of days	No. of days	Remarks
		employed	laid off	not employed	ITCHIAINS
	No Any Maternity Lo	eave Availed by G4	S Lady Gaurd for th	e month of : Apr, 2	022
6	Date on which the	woman gives notic	e under Section 6		
7	Date of D	ischarge or Dismiss	sal, if any.		
8	Date of production	of proof of pregnan	cy under section 6		
9		Date of birth of child	1		
10	Date of productior	n of proof of delivery death	or miscarriage or		
11	Date of production	of proof of illness re 10	eferred to in section		
12	Date with the amou	Int of maternity ben of expected delivery	•		
13	Date with the a	amount of subseque maternity benefit.	ent payment of		
14	Date with the am	ount of medical bor section 8	nus, if paid under		
15	Date with the amo	unt of wages paid o under section 9.	n account of leave	Ν	lil
16		nt of wages paid on n 10 and period of le			
17	Name of the per	son nominated by tl section 6	ne woman under		
18	person to whom m	the date of her dea naternity benefit and punt thereof, and the	/ or other amount		
19	person to whom the	and the child survive e amount of matern ild and the period fo	ity benefit was paid		
20	, i i i i i i i i i i i i i i i i i i i	he employer of the ng the entries in the			
21	Remarks col	umn for the use of t	he Inspector		

