



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 1st FLOOR, 18/20, HINDUSTAN TIMES HOUSE KASTURBA GANDHI MARG NEW DELHI

Name & Address of Establishment In/ under which contract is carried on : HT MEDIA LTD 1st FLOOR, 18/20, HINDUSTAN TIMES HOUSE KASTURBA GANDHI MARG NEW DELHI

Name and Address of Principal employer : HT MEDIA LTD 1st FLOOR, 18/20, HINDUSTAN TIMES HOUSE KASTURBA GANDHI MARG NEW DELHI

For the month of : Jun, 2022

SI No.	Clock NO.	Name	Father Name	Gender	1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	17	18	19	20	21	22	23	24	25	26	27	28	29	30	Present Days
1	14229	PRAMOD KR AKELA	Chandeshwar Sharma	MALE	P	P	P	P	A	P	W	P	P	P	P	A	P	W	P	P	P	P	A	P	W	P	P	P	P	A	P	W	P	P	22
2	16109	SOBAN SINGH	Bahadur Singh	MALE	PL	P	A	A	A	A	P	P	P	A	P	A	A	23																	
3	22023	SUNIL KUMAR	Sh Ramphool Singh	MALE	A	A	A	A	A	A	A	A	A	A	A	P	A	A	A	A	A	A	A	A	A	A	A	PL	A	A	A	CL	A	A	3
4	50568	BHANU PRATAP TEWARI	LAL JI TEWARI	MALE	A	A	A	P	P	A	A	A	A	A	P	A	A	A	A	A	A	P	A	A	A	CL	A	A	A	A	A	A	A	A	5
5	633486	UMESH THAKUR	SURESH THAKUR	MALE	P	P	P	A	P	W	P	P	P	P	A	P	W	P	P	P	P	A	P	W	P	P	CL	A	P	W	PL	P	P	22	





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 1st FLOOR, 18/20, HINDUSTAN TIMES HOUSE KASTURBA GANDHI MARG NEW DELHI

Name & Address of Establishment In/ under which contract is carried on : HT MEDIA LTD 1st FLOOR, 18/20, HINDUSTAN TIMES HOUSE KASTURBA GANDHI MARG NEW DELHI

Name and Address of Principal employer : HT MEDIA LTD 1st FLOOR, 18/20, HINDUSTAN TIMES HOUSE KASTURBA GANDHI MARG NEW DELHI

For the month of : Jun, 2022

SNo.	Emp Code	Employee Name	Designation	Attd (in days)	Monthly rate of wages/piece rate	BASIC	VDA	WA	Arrear	Site Allow	Other Allow	OT/NFH	Total	PF	ESI	LWF	VDD	GPAI	Other Ded	Total Ded	Net Amount Paid	Account No	Bank Name	Signature
1	14229	PRAMOD KR AKELA	HEAD GUARD	26	16606	16606	0	100	0	884	8737	0	26327	1800	197	1	22	0	0	2020	24307	'5398204222	CITI BANK, DELHI	Bank Transfer
2	16109	SOBAN SINGH	HEAD GUARD	26	16606	16606	0	100	0	867	3087	0	20660	1800	155	1	22	0	0	1978	18682	'10341707358	STATE BANK OF INDIA	Bank Transfer
3	22023	SUNIL KUMAR	HEAD GUARD	26	16606	16606	0	100	0	884	5340	0	22930	1800	172	1	22	0	0	1995	20935	'264104000088062	IDBI BANK,DELHI	Bank Transfer
4	50568	BHANU PRATAP TEWARI	HEAD GUARD	25	16566	15929	0	96	0	884	1653	0	18562	1800	139	1	22	0	0	1962	16600	'91862250002044	CANARA BANK	Bank Transfer
5	633486	UMESH THAKUR	SUPERVISOR	26	20019	20019	0	100	0	1071	9786	0	30976	1800	232	1	22	0	0	2055	28921	'100036286563	INDUSIND Bank - New Delhi	Bank Transfer



<p align="center">Form A (See Rule 3) Muster Roll (Maternity Benefit Act 1961)</p>					
	Name of Establishment			HT MEDIA LTD, 1st FLOOR, 18/20, HINDUSTAN TIMES HOUSE KASTURBA GANDHI MARG NEW DELHI	
1	Serial Number			NO CASE INVOLVED	
2	Name of the woman and her Father or if married, Husband Name				
3	Date of Appointment				
4	Nature of work				
5	Dates with month and year in which she is employed, laid off and not employed				
	Month	No. of days employed	No. of days laid off	No. of days not employed	Remarks
No Any Maternity Leave Availed by G4S Lady Gaurd for the month of : Jun, 2022					
6	Date on which the woman gives notice under Section 6			Nil	
7	Date of Discharge or Dismissal, if any.				
8	Date of production of proof of pregnancy under section 6				
9	Date of birth of child				
10	Date of production of proof of delivery or miscarriage or death				
11	Date of production of proof of illness referred to in section 10				
12	Date with the amount of maternity benefit paid in advance of expected delivery				
13	Date with the amount of subsequent payment of maternity benefit.				
14	Date with the amount of medical bonus, if paid under section 8				
15	Date with the amount of wages paid on account of leave under section 9.				
16	Date with amount of wages paid on account of leave under section 10 and period of leave granted				
17	Name of the person nominated by the woman under section 6				
18	If the woman dies, the date of her death, the name of the person to whom maternity benefit and / or other amount was paid, the amount thereof, and the date of payment				
19	If the woman dies and the child survives, the name of the person to whom the amount of maternity benefit was paid on behalf of the child and the period for which it was paid				
20	Signature of the employer of the establishment authenticating the entries in the muster roll				
21	Remarks column for the use of the Inspector				

