

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 Name and address of establishment in / under which contract is caried on :

HT MEDIA LTD

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

Nature and Location of work:

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

Name and address of Principal Employer:

HT MEDIA LTD

1	Name of the workman and address	PRAMOD KR AKELA
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)	16706.00
5	Wage period	Monthly
6	Tenure of Employment	17-07-1997
7	Remarks	



Signature of the Contractor



Form-XIV (see Rule 76) Employment Card

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

Name and address of establishment in / under which contract is caried on :

HT MEDIA LTD

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

Nature and Location of work:

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

Name and address of Principal Employer:

HT MEDIA LTD

1	Name of the workman and address	SOBAN SINGH
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)	16706.00
5	Wage period	Monthly
6	Tenure of Employment	17-02-1998
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

Name and address of establishment in / under which contract is caried on :

HT MEDIA LTD

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

Nature and Location of work:

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

Name and address of Principal Employer:

HT MEDIA LTD

1	Name of the workman and address	UMESH THAKUR
2	S.No. in the register of workman employed	
3	Nature of employment / designation	SUPERVISOR
1 4	Wages rate (with particularly of unit in case of piece work)	20119.00
5	Wage period	Monthly
6	Tenure of Employment	04-04-2015
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 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 Prinicipal employer: HT MEDIA LTD 1st FLOOR, 18/20, HINDUSTAN TIMES HOUSE KASTURBA GANDHI MARG NEW DELHI

For the month of: Oct, 2022

SI No.	Clock NO.	Name	Father Name	Gender	1 2	2 3	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	31	Present Days
1	14229	PRAMOD KR AKELA	Chandeshwar Sharma	MALE	PV	/ P	Р	CL	Р	Р	P W	P	Р	Р	Р	Р	Р	W P	Р	Р	Р	Р	P۱	Ν	P P	Р	Р	Р	Р	W	CL	26
2	16109	SOBAN SINGH	Bahadur Singh	MALE	P P	Α	Α	Р	W	Α	P P	Α	Α	Α	W	CL	Р	P A	Α	Α	W	Α	P I)	A A	Α	W	Α	Р	Р	Р	13
3	633486	UMESH THAKUR	SURESH THAKUR	MALE	A P	Р	Р	W	Р	Р	A P	Р	Р	W	Р	Р	Α	P P	Р	W	Р	Р	A I	0	P P	W	Р	Р	Α	Р	Р	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 Prinicipal employer: HT MEDIA LTD 1st FLOOR, 18/20, HINDUSTAN TIMES HOUSE KASTURBA GANDHI MARG NEW DELHI

For the month of : Oct, 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 E	SI L	NF V	DD GF	PAI Othe	r Ded	Total Ded	Net Amount Paid	Account No	Bank Name	Signature
1	14229	PRAMOD KR AKELA	HEAD GUARD	26	16606	16606	0	100	0	885	8942	0	26533	1800 1	99	0 2	22)	0	2021	24512	'5398204222	CITI BANK, DELHI	Bank Transfer
2	16109	SOBAN SINGH	HEAD GUARD	26	16606	16606	0	100	0	0	9261	0	25967	1800 1	95	0 :	22 ()	0	2017	23950	'10341707358	STATE BANK OF INDIA	Bank Transfer
3	633486	UMESH THAKUR	SUPERVISOR	26	20019	20019	0	100	0	0	11549	0	31668	1800 2	37	0 :	22 ()	0	2059	29609	'100036286563	INDUSIND Bank - New Delhi	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:

HT MEDIA LTD

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

Name and Address of Prinicipal employer:

HT MEDIA LTD

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 Oct, 2022				





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:HT MEDIA LTD

Nature and Location of Work: Security Services

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

MARG,,NEW DELHI
Month:Oct, 2022

Name of Workman: PRAMOD KR AKELA Father Name: Chandeshwar Sharma

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	643.00
4.	Amount of overtime wages	NIL
5.	Gross wages payable	26533.00
6.	Deductions, if any	2021.00
7.	Net amount of wages paid	24512.00



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:HT MEDIA LTD

Nature and Location of Work: Security Services

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

MARG,,NEW DELHI

Month:Oct, 2022

Name of Workman: SOBAN SINGH

Father Name: Bahadur Singh 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	643.00
4.	Amount of overtime wages	NIL
5.	Gross wages payable	25967.00
6.	Deductions, if any	2017.00
7.	Net amount of wages paid	23950.00



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:HT MEDIA LTD

Nature and Location of Work: Security Services

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

MARG,,NEW DELHI
Month:Oct, 2022

Name of Workman: UMESH THAKUR Father Name: SURESH THAKUR Designation: SUPERVISOR

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	774.00
4.	Amount of overtime wages	NIL
5.	Gross wages payable	31668.00
6.	Deductions, if any	2059.00
7.	Net amount of wages paid	29609.00



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:

HT MEDIA LTD

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

Name and Address of Prinicipal employer:

HT MEDIA LTD

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 damag	ges & loss in the o	current month Oc	t, 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:

HT MEDIA LTD

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

Name and Address of Prinicipal employer:

HT MEDIA LTD

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 Oct, 2022				





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:

HT MEDIA LTD

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

Name and Address of Prinicipal employer:

HT MEDIA LTD

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		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	y employees in the o	urrent month Oct, 2	022			



		For (See F	m A Rule 3)			
	M	uster Roll (Matern	ity Benefit Act 196	1)		
	N	Name of Establishment		HT MEDIA LTD, 1st FLOOR, 18/20, HINDUSTAN TIMES HOUSE KASTURBA GANDHI MARG NEW DELHI		
1		Serial Number				
0	Name of the w	Name of the woman and her Father or if married,				
2		Husband Name			NO CASE INVOLVED	
3		Date of Appointment				
4		Nature of work				
5	Dates with month and year in which she is employed, lai		' ' '			
	Month	No. of days	No. of days	No. of days	Remarks	
	Month	employed	laid off	not employed		
	No Any Maternity L	eave Availed by G4	S Lady Gaurd for th	e month of : Oct, 2	022	
6	Date on which the	Date on which the woman gives notice under Section 6				
7	Date of D	Date of Discharge or Dismissal, if any.				
8	Date of production	Date of production of proof of pregnancy under section 6				
9		Date of birth of child				
10	Date of production	Date of production of proof of delivery or miscarriage or death				
11	Date of production	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 an	Date with the amount of medical bonus, if paid under section 8				
15	Date with the amo	Date with the amount of wages paid on account of leave under section 9.			lil	
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	person to whom n	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 person to whom th	and the child survive e amount of matern	es, the name of the ity benefit was paid			
20	Signature of t	ild and the period for the employer of the ing the entries in the	establishment			
21		Remarks column for the use of the Inspector				
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