



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 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

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
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Name and address of Principal Employer :

InstaKart Services Private Limited

1	Name of the workman and address	AKHILESH PRASAD
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)	17444.00
5	Wage period	Monthly
6	Tenure of Employment	17-06-1998
7	Remarks	

Signature of the Contractor





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 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

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
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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	GUARD
4	Wages rate (with particularly of unit in case of piece work)	17334.00
5	Wage period	Monthly
6	Tenure of Employment	02-05-2023
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., 47-48, C Block Community Center Naraina, New Delhi-110028

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 Principal 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 : Jun, 2023

Sl 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	017087	AKHILESH PRASAD	Gulab Chandra Thakur	MALE	A	A	P	CL	A	A	A	A	A	P	CL	A	A	A	A	A	P	A	A	A	A	A	A	P	A	A	A	A	A	A	6
2	946845	KARAMVIR	ANUP SINGH	MALE	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	P	P	22





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

Name & Address of Contractor : G4S SECURE SOLUTIONS (INDIA) PVT.LTD., 47-48, C Block Community Center Naraina, New Delhi-110028

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 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 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 : Jun, 2023

SNo.	Emp Code	Employee Name	Designation	ESIC NO	UAN NO	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	017087	AKHILESH PRASAD	HEAD GUARD	2005229474	100077074564	26	17344.00	17344.00	0.00	100.00	0.00	0.00	3002.00	0.00	20446.00	1800.00	153.00	1.00	22.00	0.00	0.00	1976.00	18470.00	'5407911228	CITI BANK, DELHI	Bank Transfer
2	946845	KARAMVIR	GUARD	2005898008	100189797855	26	17234.00	17234.00	0.00	100.00	0.00	0.00	0.00	0.00	17334.00	1800.00	130.00	1.00	22.00	0.00	0.00	1953.00	15381.00	'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., 47-48, C Block
Community Center Naraina, New Delhi-110028
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 Principal employer:
InstaKart Services Private Limited
FOR THE MONTH OF
Jun, 2023

Sl.No	Name of workman	Father/Husband Name	Sex	Designation/nature 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 employees in the current month Jun, 2023											





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 Principal employer:InstaKart Services Private Limited Plot No-E-02, Rajan Babu Road,Adarsh Nagar,,

Month:Jun, 2023

Name of Workman: AKHILESH PRASAD

Father Name: Gulab Chandra Thakur

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	671.00
4.	Amount of overtime wages	NIL
5.	Gross wages payable	20446.00
6.	Deductions, if any	1976.00
7.	Net amount of wages paid	18470.00

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 Principal employer:InstaKart Services Private Limited Plot No-E-02, Rajan Babu Road,Adarsh Nagar,,

Month:Jun, 2023

Name of Workman: KARAMVIR

Father Name: ANUP SINGH

Designation: 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	667.00
4.	Amount of overtime wages	NIL
5.	Gross wages payable	17334.00
6.	Deductions, if any	1953.00
7.	Net amount of wages paid	15381.00

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., 47-48, C Block
Community Center Naraina, New Delhi-110028
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 Principal employer:
InstaKart Services Private Limited
FOR THE MONTH OF
Jun, 2023

Sl.No	Name of workman	Father/Husband 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 deduction for damages & loss in the current month Jun, 2023												





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

Name & Address of Contractor:
 G4S SECURE SOLUTIONS (INDIA) PVT.LTD., 47-48, C Block
 Community Center Naraina, New Delhi-110028
 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 Principal employer:
 InstaKart Services Private Limited
FOR THE MONTH OF
 Jun, 2023

Sl.No	Name of workman	Father/Husband Name	Designation/nature 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 & loss in the current month Jun, 2023											





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

Name & Address of Contractor:
G4S SECURE SOLUTIONS (INDIA) PVT.LTD., 47-48, C Block
Community Center Naraina, New Delhi-110028
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 Principal employer:
InstaKart Services Private Limited
FOR THE MONTH OF
Jun, 2023

Sl.No	Name	Father/Husband Name	Name of employment/Designation	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 current month Jun, 2023										



Form A
(See Rule 3)
Muster Roll (Maternity Benefit Act 1961)

	Name of Establishment	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			
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, 2023					
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				

