



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
B-65 GTK, Industrial Aria, 110007,

Nature and Location of work:

Security & Services B-65 GTK, Industrial Aria, 110007,

Name and address of Principal Employer :

InstaKart Services Private Limited

1	Name of the workman and address	KULDEEP KUMAR
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	22-11-2013
7	Remarks	

Signature of the Contractor





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(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 carried on :

InstaKart Services Private Limited
B-65 GTK,Industrial Aria,110007,

Nature and Location of work:

Security & Services B-65 GTK,Industrial Aria,110007,

Name and address of Principal Employer :

InstaKart Services Private Limited

1	Name of the workman and address	PRAMOD KUMAR
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	04-05-2023
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 B-65 GTK Industrial Aria 110007

Name & Address of Establishment In/ under which contract is carried on : InstaKart Services Private Limited B-65 GTK Industrial Aria 110007

Name and Address of Principal employer : InstaKart Services Private Limited B-65 GTK Industrial Aria 110007

For the month of : May, 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	31	Present Days
1	632292	KULDEEP KUMAR	MEHAR CHAND SHARMA	MALE	P	W	P	P	P	A	A	A	W	PL	PL	PL	P	P	A	A	A	A	CL	A	P	A	PL	PL	PL	PL	PL	P	A	PL	PL	19
2	947106	PRAMOD KUMAR	BHAGIRATH	MALE	A	A	A	A	A	P	P	W	P	P	P	P	A	A	W	P	P	P	P	P	A	W	P	P	P	P	P	A	W	P	P	18





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 B-65 GTK Industrial Aria 110007

Name & Address of Establishment In/ under which contract is carried on : InstaKart Services Private Limited B-65 GTK Industrial Aria 110007

Name and Address of Principal employer : InstaKart Services Private Limited B-65 GTK Industrial Aria 110007

For the month of : May, 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	632292	KULDEEP KUMAR	GUARD	2014003652	100197515647	21	17234.00	13920.00	0.00	81.00	0.00	442.00	0.00	0.00	14443.00	1670.00	108.00	0.00	22.00	0.00	0.00	1800.00	12643.00	'0000000309344 0453	CENTRAL BANK OF INDIA	Bank Transfer
2	947106	PRAMOD KUMAR	GUARD	1113890998	100276516829	22	17234.00	14583.00	0.00	85.00	0.00	0.00	0.00	0.00	14667.00	1750.00	110.00	0.00	22.00	23.00	0.00	1905.00	12763.00	'0264104000197 830	IDBI BANK,DELHI	Bank Transfer





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 No. 1, SF No. 105, 105/2, MKS Tower,Sundaram Nagar,
Aachipatti Panchayat,Sangampalayam Village,COIMBATORE

Month:May, 2023

Name of Workman: KULDEEP KUMAR

Father Name: MEHAR CHAND SHARMA

Designation: GUARD

1.	No. of Days Worked	21
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	14443.00
6.	Deductions, if any	1800.00
7.	Net amount of wages paid	12643.00

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 No. 1, SF No. 105, 105/2, MKS Tower,Sundaram Nagar,
Aachipatti Panchayat,Sangampalayam Village,COIMBATORE

Month:May, 2023

Name of Workman: PRAMOD KUMAR

Father Name: BHAGIRATH

Designation: GUARD

1.	No. of Days Worked	22
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	14667.00
6.	Deductions, if any	1905.00
7.	Net amount of wages paid	12763.00

Initials of the Contractor or his Representative



<p align="center">Form A (See Rule 3) Muster Roll (Maternity Benefit Act 1961)</p>					
	Name of Establishment			InstaKart Services Private Limited, B-65 GTK Industrial Aria 110007	
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 : May, 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				

