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Se	e F	Rule	78(1	)(a)(ii)

## **Register of Deduction**

Name and Address of Contractor	DIT. E	NGINE	ER & Con	TRACTOR	
Stop. NO - 10 GROUND	PLOOR	GOLE	MARKET	BAKHOTDARPUR	DR436
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Name and Location of Work.

## for Damage or Loss

Name and Address of Establishment in/under which Contract is Carried on
Which Contract is Carried on
Name and Address of Principal Employer. TATA 80 WER DELIN DOCUMENTATION

				Designations	DAMAGE OR LOSS								
S. No.	NAME OF WORKMAN	Father's/Husband's Name		Employment	Particulars	Date D	Workman showed cause against Deduction, if so, Enter Date	Name of Person in whose Presence Employee's Explanation was Heard	DEDUCTION IMPOSED		DATE OF RECOVERY		
1									Amount	No. of Instalments	First Instalment		
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