Form XX

[See Rule 78 (2) (d)]

Register of Deductions for Damage or Loss

Name and address of Contractor: **LISA** , 205 Iind Floor,Plot No.12,Aditya Commercial Complex,Community Center,Preet Vihar,Delhi-110092

Name and address of establishment in/under which contractor is carried on: **Cushman & Wakefield Property Management Service Pvt.Ltd.**

Nature and Location of worked: **Housekeeping & Maintenance,** Delhi

Name and address of Principal Employer: **Visiter Center Red Fort** Netaji Subhash Marg,Chandni Chowk,Delhi -110006

Serial no.	Name of workmen	Father's/Husband's name	Designation nature of employment	Particulars of damage or loss	Date of damage or loss	Whether workmen showed cause against deductions	Name of person in whose presence employee's explanation was heard	Amount of deduction imposed	No. of instalments date of Recovery	First instalment	Last instalment	Remarks
1	2	3	4	5	6	7	8	9	10	11	12	13
	No any Deductions for Damage or Loss during the month of December- 2022											

