

Form XX

[(See Rule 78(1)(a)(ii)]

Register of Deduction for Damages or Loss

Name and Address of Contractor

INNOVISION LIMITED.
 Plot No 251 Udyog Vihar
 Phase IV,Gurgaon-122001(HR.)

Name and Address of Establishment in/under
 which contract is carried on

M/s Fortis C - Doc Healthcare Limited
 Chirag Enclave , New Delhi

Nature and Location of work

Security Services

Serial No	Name of Workman	Father's Husband's Name	Designation and Department	Particulars of Damage or Loss	Date of Damage	Whether worker showed cause	Name of person in whose persence	Amount of deduction imposed	No. of instalments	Date of Recovery		Remarks
										First Installment	Last installement	
1	2	3	4	5	6	7	8	9	10	11	12	13

NO DEDUCTION FOR DAMAGES OR LOSS WERE MADE FROM ANY WORKERS DURING THE MONTH OF**MAY-2023**