Form XXII [See rule 78(2)(d)) Name and Address of Contractor Nature and Location of work :-				<u>R</u>	egister	r of Adva	ances				
			INNOVISION LIMITED Room No -201, lind Floor, Cb 202 A, Ring Road Naraina, New Delhi-110028 Security Guards, Jasola			Name and Address of Estabilishment in /under which contract is carried on Name and Address of Principal Employer		M/s Escorts Health Institute and Reserch Centre LTD Okhla Road, New Delhi-110025 M/s Escorts Health Institute and Reserch Centre LTD			
											Serial No
1	2	3	4	5	6	7	8	9	10	11	
							MONTH OF JUI				
	NO AD		VAS GIVEN	TO ANY WO		DURING THE	MONTH OF SEI	PTEMBER-2021			
	NO AD	VANCE V	VAS GIVEN	TO ANY WO		DURING THE	MONTH OF OC	TOBER-2021			
	NO AD	VANCE V	VAS GIVEN	TO ANY WO		DURING THE	MONTH OF NO	VEMBER-2021			
	•							Innovision Limit	ted		
			Authorised Signatory								