

Form No XV

(See Rule 77)

SERVICE CERTIFICATE

96

12086

Name and Address of the Contractor

INNOVISION LIMITED.

Age or Date of Birth.....

07-07-90

Block-68/273,1st,2nd & 3rd Floor,Sukhrali,M.G.Road,

Identification marks.....

Nature and location of work:-

Security Service

Gurgaon

Name and address of principal employer

Name and Address of the Workmen

SONUSINGH

Name and Address of establishment in/under which contract is carried out

Father's Husband's Name

M/s ESCORTS HEALTH INSTITUTE AND RESERCH CENTRE LTD

MANI RAM

Serial No.	Total period for which employed		Actual number of days worked	Nature of work done	Rate of wages	Total wages earned by workman during the period	Total deduction made if any	Total wages paid	Remarks
	From	To							
1	2	3	4	5	6	7	8	9	10
96	01-07-21	31-07-21	30	S/G	14842	14363	1975	12388	

PLACE:- Delhi

DATE :- 31-07-21



Form No XV

(See Rule 77)

SERVICE CERTIFICATE

97

87321

Name and Address of the Contractor

INNOVISION LIMITED.

Age or Date of Birth.....

11-01-94

Block-68/273,1st,2nd & 3rd Floor,Sukhrali,M.G.Road,

Identification marks.....

Nature and location of work:-

Security Service

Gurgaon

Name and address of principal employer

Name and Address of the Workmen

MOHIT KUMAR

Name and Address of establishment in/under which contract is carried out

Father's Husband's Name

M/s ESCORTS HEALTH INSTITUTE AND RESERCH CENTRE LTD

Narender

Serial No.	Total period for which employed		Actual number of days worked	Nature of work done	Rate of wages	Total wages earned by workman during the period	Total deduction made if any	Total wages paid	Remarks
	From	To							
1	2	3	4	5	6	7	8	9	10
97	01-07-21	31-08-21	61	S/G	14842	29205	4016	25189	

PLACE:- Delhi

DATE :- 31-08-21



Form No XV

(See Rule 77)

SERVICE CERTIFICATE

98

71508

Name and Address of the Contractor

INNOVISION LIMITED.

Age or Date of Birth..... 15/03/1981

Block-68/273,1st,2nd & 3rd Floor,Sukhrali,M.G.Road,

Identification marks.....

Nature and location of work:-

Security Service

Gurgaon

Name and address of principal employer

Name and Address of the Workmen

MANISH KUMAR

Name and Address of establishment in/under which contract is carried out

Father's Husband's Name

M/s ESCORTS HEALTH INSTITUTE AND RESERCH CENTRE LTD

Satendra Singh

Serial No.	Total period for which employed		Actual number of days worked	Nature of work done	Rate of wages	Total wages earned by workman during the period	Total deduction made if any	Total wages paid	Remarks
	From	To							
1	2	3	4	5	6	7	8	9	10
98	01-07-20	31-08-21	426	S/G	14842	203958	28044	175914	

PLACE:- Delhi

DATE :- 31-08-21



Form No XV

(See Rule 77)

SERVICE CERTIFICATE

99

83393

Name and Address of the Contractor

INNOVISION LIMITED.

Age or Date of Birth..... 25/12/2001

Block-68/273,1st,2nd & 3rd Floor,Sukhrali,M.G.Road,

Identification marks.....

Nature and location of work:-

Security Service

Gurgaon

Name and address of principal employer

Name and Address of the Workmen

BIKKI KUMAR

Name and Address of establishment in/under which contract is carried out

Father's Husband's Name

M/s ESCORTS HEALTH INSTITUTE AND RESERCH CENTRE LTD

Diwakar Jha

Serial No.	Total period for which employed		Actual number of days worked	Nature of work done	Rate of wages	Total wages earned by workman during the period	Total deduction made if any	Total wages paid	Remarks
	From	To							
1	2	3	4	5	6	7	8	9	10
99	01-07-21	31-08-21	61	S/G	14842	29205	4016	25189	

PLACE:- Delhi

DATE :- 31-08-21

