

NAME OF COMPANY--R.B. ENGINEERS

MONTH SEPTEMBER 2023

FORM XX
 [(See rule 78 (1) (a) (ii)]
Register of Deductions for Damage or Loss

Sr. No.	Name of workman	Father's name	Designation	Particulars of damage or loss	Date of damage or loss	Whether workman showed cause against deduction	Name of person in whose presence employee's explanation was heard	Amount of deduction imposed	No. of installments	First installment	Last installment	Remarks

