FORM XX

1[See **rule 78 (1) (a) (ii)]**

Register of Deductions for Damage or Loss

NAME OF COMPANY--R.B.ENGINEERS

MONTH NOVEMEBER 2024

Sr. No.	Name of workman	Father's name	Designation	Particulars ofdamage or loss	Date of damage or loss	Whether work man 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
				NO DEDCUTION FRO DAMGE OR LOSS FOR THE MONTH OF NOV 2024								

R. B. ENGINEERS * Auth. Signatory