NAME OF COMPANY--R.B.ENGINEERS

**FORM XXIII**
[1][See rule 78 (1) (a) (iii)]
**Register of Overtime**

MONTH , OCTOBER 2024

| Sr. No. | Name of workman | Father's name | Sex | Designation/ | Date on which overtime worked | Total overtime worked or production in case of piece-rated | Normal rate of wages | Overtime rate of wages | Overtime earnings | Date on which overtime wage paid | Remarks |
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| | | | | NO OVERTIME FOR THE MONTH OF OCT 2024 | | | | | | | |
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