FORM XX

I|See rule 78 (1) (a) (ii)]

Register of Deductions for Damage or Loss

MONTH OCTUBER 2024

## NAME OF COMPANY-- JAI MATA ENTERPRIES

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		Amount of deduction imposed	No. of installments	First installment	Last installment	Remarks
			NO	DEDUC	TIONS FO	R DAMA	E OR LOSS	FORTHE	MONTH (	F OCTU	BER 2024	

