NAME C	OF COMPA	NY JAI MATA E	NTERPRIES			FORM XX 1[See rule 78 (1) (a) (ii)] Register of Deductions for Damage or Loss			MONTH JUNE 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 E	EDUCTIO	NS FOR	DAMAGE	OR LOS	FORTHE M	ONTH OF	JUNE 202	24		

