FORM- XIX.

[See rule 241(1) (b)]

Register of Deductions for damage or Loss.

Name & Address of establishment						Name and permanent					
where building and other						address of establishment					
construction work is to be carried											
on											
Nature of building or other											
construction work											
				Name and address of the employer							
					Wage period						
						Monthly					
S.N	Name of work		Father's/		Designation/		Particulars		Date of damage		
0			Husband		Nature of		of		or loss		
				's name		employment		damage/Los			
								S			
1.	2.	2.		3.		4.		5.		6.	
Whether		Name	Name of		(of First	First			Amount of	
building		persons in		insta	allmer	nt install	installment		ment	deduction	
worker showed		whose								imposed	
cause against		presence									
deduction		building									
		workers									

	explanation				
	was heard.				
7.	8.	9.	10.	11.	12.