FORM XIV

[See rule 19(3)(a)(ii)]

MASTERROLL

S. No.	Name of the Workmen	Father's / Husband's Name	Sex	Date																											Total No. of Days Worked
1	2	3	4	5																											6
Rate of Wages		Overtime worked	Rate of OT																												

ABHIJEET PRAKASH Digitally signed by ABHIJEET PRAKASH
Date: 2022.04.01 10:00:00 IST