

**MUSTER ROLL**

FORM XVI [See Rule 78 (1)(a)(f)]

Name and Address of Contractor: **Randstad India Pvt. Ltd, Ground Floor,copia corporate suites ,Jasola District center ,Jasola vihar, New Delhi - 110025**  
 Nature and Location of Work: **support services**  
 Name and Address of Principal Employer: **CP Wholesale India Private Limited, LOTS Wholesale Solutions,Metro Station Box, Netaji Subhash Place Metro,New Delhi, 110034**  
 Name and Address of Establishment in/ under which Contract is Carried on: **CP Wholesale India Private Limited, LOTS Wholesale Solutions,Metro Station Box, Netaji Subhash Place Metro,New Delhi, 110034**

For the Month of 10th Sep 22 to 9th Oct 22

Sl. No	Emp code	Name Of Employee	Gender	Date / Units																										Total No of paid days	Remakrs					
				10	11	12	13	14	15	16	17	18	19	20	21	22	23	24	25	26	27	28	29	30	1	2	3	4	5			6	7	8	9	
1	1480720	Mahendra Kumar	M	P	P	P	P	P	P	WO	P	P	P	P	P	P	WO	P	P	P	P	P	P	WO	P	H	P	P	P	P	P	WO	P	P	31	
2	1481134	Amit Pandey	M	P	P	WO	P	P	P	P	P	P	WO	P	P	P	P	P	WO	P	P	P	P	P	P	P	WO	P	P	P	P	P	P	P	31	
3	1480805	Sunny	M	P	P	P	WO	P	P	P	P	P	P	WO	P	P	P	P	P	WO	P	P	P	P	H	P	WO	P	P	P	P	P	P	31		
4	1485181	Brijesh	M	P	P	P	P	P	P	WO	P	P	P	P	P	WO	P	P	P	CL	CL	P	WO	P	H	CL	P	CL	P	WO	P	P	31			

Wo-weekly off  
 CL-Casual leave, SL-Sick Leave  
 CO-compensatory off  
 EL-Earned Leave  
 H-Holiday  
 A-Loss of pay

