

Form XVI  
MUSTER ROLL  
[See Rule 78(1)(a)(ii)]

<b>Name and Address of Contractor:</b>	ICON Facilitators Pvt.Ltd. C-28, 2Nd Floor, Community Center Janak Puri New Delhi 110058
<b>Nature and Location of Ork:</b>	Integrated Facility Management
<b>Name and Address of Principal Employer:</b>	ERNST & YOUNG SERVICES PVT. LTD. 4TH FLOOR, ASSET NO-8, OICE NO-405, ORLD MARK- 2, AEROCITY NEW DELHI 110037
<b>Name and Address of Establishment in/ under which Contract is Carried on:</b>	CBRE SOUTH ASIA PVT. LTD. PTI BUILDING 4TH PARLIAMENT STREET NEW DELHI

For the month of :-AUGUST-2023

Sl.No	Name Of Employee	Father's/Husband's Name	Gender	Date/Units																															Total No. Of Days/Units Orked	Remarks
				1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	17	18	19	20	21	22	23	24	25	26	27	28	29	30	31		
1	RAGHUVENDR DUBEY	LALCHANDR DUBEY	M	P	P	OFF	P	P	P	P	P	P	OFF	P	P	P	P	H/P	P	OFF	P	P	P	P	P	OFF	P	P	P	P	P	H	OFF	31		
2	VIKAS KUMAR	WAKIL BAJAR	M	P	P	P	P	P	OFF	P	P	P	P	P	OFF	P	H	P	P	P	P	OFF	P	P	P	P	P	P	OFF	P	P	H	A	30		
3	RAMANUJ SHUKLA	MAHESH PRASAD SHUKLA	M	P	P	P	P	OFF	P	P	P	P	P	OFF	P	P	H	P	P	P	OFF	P	P	P	P	P	P	OFF	P	P	P	H/P	31			

Signature of the Contractor  
New Delhi

