Form XVI																																			
														MUS	TER R	OLL																			
													[Se	e Ru	e 78(:	1)(a)(ii)																		
Name	Name and Address of Contractor:										ICON Facilitators Pvt.Ltd. C-28, 2Nd Floor, Community Center Janak Puri New Delhi 110058																								
Natur	Nature and Location of Work:]	Integrated Facility Management																						
Name	Name and Address of Principal Employer:										NCR CORPORATION INDIA PVT LTD. DELHI 6TH FLOOR, UNIT NO.602B/1KONNECTUS TOWER, BHAUBHUTI MARG, NEAR MINTO															MINTO									
]	BRIDGE, NEW DELHI 110001																					
Name and Address of Establshment in/ under which Contract is Carried on:									•	CBRE SOUTH ASIA PVT. LTD. PTI BUILDING 4TH PARLIAMENT STREET NEW DELHI NEW DELHI-110025																									
F 4b	ne month of :- OCTOBER-202	22																																	
FOF U	ie month of :- OCTOBER-202	23																																	
Sl.No	Name Of Employee	Father's/Husband's Name																Date/U	nits															Total No. Of	Remarks
			Gende	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	Days/Units	
1	RAJESH SHARMA	DINESH SHARMA	М	wo	Н	Р	Р	Р	Р	Р	WO	Р	Р	Р	Р	Р	Р	WO P	Р	Р	Р	Р	Р	wo	Р	Н	Р	Р	Р	Р	wo	Р	Р	31	

Signature of the Contractor