

Form XVI

MUSTER ROLL

[See Rule 78(1)(a)(ii)]

Name and Address of Contractor:	ICON Facilitators Limited. C-28, 2Nd Floor, Community Center Janak Puri New Delhi 110058
Nature and Location of Work:	Integrated Facility Management at New Delhi
Name and Address of Principal Employer:	DLF FOUNDATION DELHI, MCD PARK, WARD NO-86, SOUTH ZONE, W BLOCK GREATER KAILASH NEW DELHI-110048
Name and Address of Establishment in/ under which Contract is Carried on:	DLF FOUNDATION DELHI, MCD PARK, WARD NO-86, SOUTH ZONE, W BLOCK GREATER KAILASH NEW DELHI-110048

For the month of :- SEP'2024

Sl.No	Name of Employee	Father's/Husband's Name	Gender	Date/Units																												Total No. Of Days/Units Worked	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		
1	KANCHAN KUMAR	BACCHU YADAV	Male	OFF	P	P	P	P	P	P	OFF	P	P	P	P	P	OFF	P	P	P	P	P	P	OFF	P	P	P	P	P	OFF	P	30	
2	HARGOVIND	RAM GOPAL	Male	OFF	P	P	P	P	P	P	OFF	P	P	P	P	P	OFF	P	P	P	P	P	P	OFF	P	P	P	P	P	OFF	P	30	
3	RANJAN KUMAR	YOGINDER SINGH	Male	OFF	P	P	P	P	P	P	OFF	P	P	P	P	P	OFF	P	P	P	P	P	P	OFF	P	P	P	P	P	OFF	P	30	
4	ASHOK PRASAD	RAM ASHISH	Male	OFF	P	P	P	P	P	P	OFF	P	P	P	P	P	OFF	P	P	P	P	P	P	OFF	P	P	P	P	P	OFF	P	30	
5	SONU	SUKHAI PRASAD YADAV	Male	OFF	P	P	P	P	P	P	OFF	P	A	P	A	A	P	OFF	P	P	P	P	P	OFF	P	P	P	P	P	OFF	P	27	
6	RAM AAUTAR	RAGHVIR	Male	OFF	P	P	P	P	P	P	OFF	P	P	P	P	P	OFF	P	P	P	P	P	P	OFF	P	P	P	P	P	OFF	P	30	
7	SATYA NARAYAN YADAV	RAM ASARE	Male	OFF	P	P	P	P	P	P	OFF	P	P	P	P	P	OFF	P	P	P	P	P	P	OFF	P	P	P	P	P	OFF	P	30	

Signature of The Contractor

