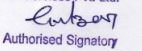


**REGISTER OF WAGES**  
FORM XVII, See Rule-78 (1) (a) (i)

For Watermelon HR Services Pvt. Ltd.



Authorised Signatory

Name & Address of Contractor:- M/s Watermelon HR Services Pvt. Ltd, 117, Basement, New Rajdhani Enclave, Preet Vihar, Delhi-92

Nature and Location of Work:- Logistic Services , Delivery Services , - . **Delhi - Patpatganj 7129, New Delhi India**

Name & Address of Establishment In/ under which contract is carried on :-Hiveloop Technology Private Limited 20/1, 1090G, 18th Cross, 14th Main,Sector - 3, HSR Layout, Bangalore, Karnataka 560102

Name and Address of Principal Employer:- Hiveloop Technology Private Limited 20/1, 1090G, 18th Cross, 14th Main,Sector - 3, HSR Layout, Bangalore, Karnataka 560102

For the month of Feb 2020

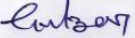
Sl. No	UDAAN ID	Offer ID	Location Name	State	Name of Workman	Designation/Nature of Works Done	No. of Days Worked	Unit of works done	Daily- rate of wages / Pieces - Rate	Earnings with Variables															Deduction								Total Deduction	Net Amount Paid	Signature /Thumb Impressio n of workman	Initial of Contract or or his Represen tative				
										Basic Wage	Minimum / basic Wages Arrear	Arrear Basic Wage	HRA	HRA Arrear	Special Allowanc e	Arrear Spl Allow	Ad Bonus	Statutory Bonus	Arrear Statuto ry Bonus	Over Time	Attenda nce Bonus	Arrear Amount	Performance Incentive	Night shift Allowa nce	Leave Encash ment Payme nt	Gross Salary	Notice Period Pay	Extra Payable Amount	Retrenc hment Allowan ce	Gratuit y Amount	Reimbu rsement	Statutor y Liability Payable					Diwali Bonus	Total Gross	Recovery	Empluye PF
1																						26.00	27.00		28	30	31	32	33	34	35	36	37	41	42	43	44			
1	U53317	U53317	hi - Patpatganj 7	New Delhi	ANUJ SHARMA	TeleCaller	29	-	19499	18000	0	0	0	0	0	0	0	0	1499	0	0	0	0	0	0	0	19499	0	1800	147	0	0	0	0	0	0	1947	17552	-	NEFT
2	U40087	HL54081	hi - Patpatganj 7	New Delhi	Tikaram Saini	Field Executive	29	-	17712	16350	0	0	0	0	0	0	0	0	0	1362	0	0	0	380	0	0	18092	0	1800	133	0	0	0	0	0	1933	16159	-	NEFT	



**REGISTER OF OVERTIME**

FORM XXIII, See Rule 78 (1) (a) (iii)

For Watermelon HR Services Pvt. Ltd.

  
Authorised Signatory

Name &amp; Address of Contractor:- M/s Watermelon HR Services Pvt. Ltd. 117, Basement, New Rajdhani Enclave, Preet Vihar, Delhi-92

Nature and Location of Work:- Logistic Services , Delivery Services , - Pan India.

**Delhi - Patpatganj 7129 New Delhi India**

Name &amp; Address of Establishment In/ under which contract is carried on :-Hiveloop Technology Private Limited 20/1, 1090G, 18th Cross, 14th Main, Sector - 3, HSR Layout, Bangalore, Karnataka 560102

Name and Address of Principal Employer:- Hiveloop Technology Private Limited 20/1, 1090G, 18th Cross, 14th Main, Sector - 3, HSR Layout, Bangalore, Karnataka 560102

For the month of Feb 2020

Sl.No	Em Code	Offer ID	Location Name	State	Name Of the Employee	Father's/Husband's Name	Sex	Dasignation / nature of employment	Dates on which overtime worked	Total overtime worked or production in case of piece--rates	Normal rate of wages	overtime rate of wages	overtime earnings	Date on which overtime wages paid	Remarks
1					2	3	4	5	6	7	8	9	10	11	12
1	U53317	U53317	Delhi - Patpatganj 71	New Delhi	ANUJ SHARMA		MALE	TeleCaller	Feb-20	.0	19499	187	0	07.03.2020	-
2	U40087	HL54081	Delhi - Patpatganj 71	New Delhi	Tikaram Saini		MALE	Field Executive	Feb-20	.0	17712	170	0	07.03.2020	-

**REGISTER OF DEDUCTION FOR DAMAGE OR LOSS**  
FORM XX ,See Rule 78 (1) (a) (ii)

For Watermelon HR Services Pvt. Ltd.  
*[Signature]*  
Authorised Signatory

Name & Address of Contractor:- M/s Watermelon HR Services Pvt. Ltd. 117, Basement, New Rajdhani Enclave, Preet Vihar, Delhi-92

Nature and Location of Work:- Logistic Services , Deliver; **Delhi - Patpatganj 7129, New Delhi India**

Name & Address of Establishment In/ under which contract is carried on :-Hiveloop Technology Private Limited 20/1, 1090G, 18th Cross, 14th Main, Sector - 3, HSR Layout, Bangalore, Karnataka 560102

Name and Address of Principal Employer:- Hiveloop Technology Private Limited 20/1, 1090G, 18th Cross, 14th Main, Sector - 3, HSR Layout, Bangalore, Karnataka 560102

Sl.No	Name Of Employee	Father's/ Husband's Name	Nature of Employment/ Designation	Particulars of Damages or Loss	Date of Damage or Loss	Whether workman showed cause against	Name of person in whose presence	Amount of deduction imposed	Date of Recovery			Remarks
									No. of Instalments	First Instalments	Last Instalments	
1	2	3	4	5	6	7	8	9	10	11	12	
<b>NO DEDUCTION FOR DAMAGE OR LOSS AGAINST ANY EMPLOYEES DURING THE MONTH OF Feb 2020</b>												



## REGISTER OF ADVANCES

FORM XXII, See Rule 78 (1) (a) (ii)

Name & Address of Contractor:- M/s Watermelon HR Services Pvt. Ltd. 117, Basement, New Rajdhani Enclave, Preet Vihar, Delhi-92

Nature and Location of Work:- Logistic Services , Delivery Services , - Pan Indi: Delhi - Patpatganj 7129\_New Delhi India

Name & Address of Establishment In/ under which contract is carried on :- Hiveloop Technology Private Limited 20/1, 1090G, 18th Cross, 14th Main, Sector - 3, HSR Layout, Bangalore, Karnataka 560102

Name and Address of Principal Employer:- Hiveloop Technology Private Limited 20/1, 1090G, 18th Cross, 14th Main, Sector - 3, HSR Layout, Bangalore, Karnataka 560102

Sl.No	Name Of the Employee	Father's/ Husband's Name	Nature of Employment/	Wage Period and wages	Date and amount of advance given	Purpose(s) for Which advance	No of Instalments by which advance to be	Date and amount of each instalment was	Date on which last instalment was	Remarks
1	2	3	4	5	6	7	8	9	10	
<b>NO ADVANCE HAS BEEN PAID TO ANY EMPLOYEES FOR THE MONTH OF Feb 2020</b>										

For Watermelon HR Services Pvt. Ltd.  
  
Authorised Signatory

**15a FORM 11  
ACCIDENT BOOK**

**EMPLOYEES' STATE INSURANCE CORPORATION**  
*(Regulation 66)*

**Name and Address of the Establishment :** Watermelon HR Services Pvt. Ltd. 117, Basement, New Rajdhani Enclave, Preet Vihar, Delhi-92

**Establishment Sub Code:- 10001181970001099**

Sl. No.	Date of Notice	Time of Notice	Name and Address of Injured Person	Sex	Age	Insurance No.	Shift, department and Occupation of the employee	Details of Injury					What exactly was the injured person doing at the time of accident	Name, occupation, address and signature or the thumb impression of the person(s) giving notice	Signature and designation of the person who makes the entry in the Accident Book	Name, address and occupation of two witnesses	Remarks, if any
								Cause	Nature	Date	Time	Place					
1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	17	18
<b>NO ACCIDENT OF ANY EMPLOYEES FOR THE MONTH OF Feb 2020</b>																	

For Watermelon HR Services Pvt. Ltd.  
*[Signature]*  
Authorised Signatory