

# MUSTER ROLL



Name and Address of Contractor ..... STERLING SERVICES WORK HOUSE

Nature and location of work ..... STERLING SECURITY CHAMBERS

Name and address of Establishment in/under which contract is carried on ..... SHOP CWCS

Name and address of Principal Employer ..... for the month of Aug 16

Sl. No.	Name of workman	Father's/Husband's Name	Sex	Dates																															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	Ram Babu BATHA	FUL DEV BATHA		P	P	P	P	P	P	P	P	P	P	P	H	P	P	P	P	P	P	P	P	P	P	P	P	P	P	P	P	P	P	31	
2	SURESH CHAND	RAMA KISHAN		P	P	P	P	P	P	P	P	P	P	H	P	P	P	P	P	P	P	P	P	P	P	P	P	P	P	P	P	P	P	30	
3	RAJESH KR. THAKUR	SUREH DEV THAKUR													P	P	P	P	P	P	H	P	P	P	P	P	P	P	P	P	P	P	P	25	
4	PRAMBU JHA	SHANIKAR JHA		P	P	P	P	P	P	P	P	P	P	H	P	P	P	P	P	P	P	P	P	P	P	P	P	P	P	P	P	P	P	26	
5	YADRAM SHARMA	MAADAN MOHAN		P	P	P	P	P	P	P	P	P	P	H	P	P	P	P	P	P	P	P	P	P	P	P	P	P	P	P	P	P	P	25	
6	ARUN KUMAR	DAMA SINGH		P	P	P	P	P	P	P	P	P	P	H	P	P	P	P	P	P	P	P	P	P	P	P	P	P	P	P	P	P	P	31	
7	RAVINDR KR. SINGH	MANHESHWAR SINGH		P	P	P	P	P	P	P	P	P	P	P	P	P	P	P	P	P	P	P	P	P	P	P	P	P	P	P	P	P	P	08	
8	RAS KISHOR	SUNDR LAL																																06	
9	ANAND GIRI	SURESH GIRI																																04	

For Sterling Security Chambers  
  
 Authorised Signatory