

FORM XXIII (14)

[See rule 78 (1) (a) (iii)]

Register of Overtime

Name and address of contractor: **M/s Satyam Enterprises**

Nature and location of work: **Professional Services towards Enforcement Activity (CEG)**

Name and address of establishment in/under which contract is carried on

Name and address of principal employer: **Tata Power Delhi Distribution Limited**

Sr. No.	Name of workman	Father's/Husband's name	Sex	Designation/ Nature of employment	Date on which overtime worked	Total overtime worked or production in case of piece-rated
1	2	3	4	5	6	7

No overtime during the month of April-2025

Normal rate of wages	Overtime rate of wages	Overtime earnings	Date on which overtime wage paid	Remarks
8	9	10	11	12

For SATYAM ENTERPRISES

[Signature]
Partner