## Anx - A - Attendance details

| Annexure   | - A - Send Weekly<br>labour charges     |                                         | *************************************** |                                         | :            |
|------------|-----------------------------------------|-----------------------------------------|-----------------------------------------|-----------------------------------------|--------------|
| Details of | labour charges                          | *************************************** | *                                       | ······································  |              |
| Name of o  | contractor:                             | Homeline Infra                          | *************************************** |                                         | <u>.</u>     |
| Company    |                                         | MCMET                                   |                                         |                                         |              |
| Project na | me:                                     | Manilal Modi Mem                        | orial Hospital                          | •                                       |              |
| Date:      | **************************************  | 01.10.2020                              |                                         | ••••••••••••••••••••••••••••••••••••••  |              |
| Period     | , , , , , , , , , , , , , , , , , , , , | Manilal Modi Mem<br>01.10.2020<br>From: | 24.09.2020                              | To:                                     | 30.09.2020   |
|            |                                         |                                         |                                         | ቅ፡                                      |              |
| Sl. No.    | Work Type                               | Worker Type                             | Quantity                                | Rate                                    | Amount       |
| 1          | Civil work                              | Mason                                   | 57                                      | 575.00                                  | 32,775       |
|            | Civil work                              | Male helper                             | 45                                      | 400.00                                  | 18,000       |
| 3          | Civil work                              | Female helper                           | -                                       | 350,00                                  | -            |
| 4          | RCC work                                | Mason                                   | -                                       | 550,00                                  |              |
| 5          | RCC work                                | Male helper                             | -                                       | 400.00                                  | _            |
| 6          | RCC work                                | Female helper                           | -                                       | -                                       | -            |
| 7          | Earth work                              | Mason                                   |                                         | -                                       | -            |
| 8          | Earth work                              | Male helper                             | -                                       | 450.00                                  | -            |
| 9          | Farth work                              | Female helper                           | ···········                             | 400.00                                  | -            |
| 10         | Electrician<br>Electrician              | Mason                                   | -                                       | 550.00                                  | -            |
| 11         | Electrician                             | Male helper                             | -                                       | 400.00                                  | -            |
| 12         |                                         | ······································  | -                                       |                                         | -            |
| 13         |                                         | :                                       |                                         |                                         | -            |
| 14         | *************************************** | **************************************  |                                         | ***********************************     | -            |
| 15         |                                         | ······································  |                                         |                                         | -            |
| 16         |                                         |                                         |                                         |                                         | -            |
| 17         |                                         |                                         |                                         | *************************************** | -            |
| 18         |                                         |                                         |                                         | *************************************** |              |
| 19         |                                         |                                         |                                         | *************************************** | -            |
| 20         |                                         |                                         |                                         | *************************************** | *            |
|            | Total                                   |                                         |                                         |                                         | 50,775       |
|            | Payment approved by M                   | ID:                                     |                                         |                                         |              |
| Prepared b |                                         |                                         |                                         |                                         | MDs approval |
| Name       | Pushpalatha                             |                                         |                                         |                                         |              |
| Date       | 01.10.2020                              |                                         |                                         | *************************************** |              |

Certified by:

Project Manager
MC MODI EDUCATIONAL TRUST

Certified by:

ADMIN MANAGER

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## Anx - B - Hire charges

| nnexure - B     | - Send Weekly                           |                |                                         |                                         |                |
|-----------------|-----------------------------------------|----------------|-----------------------------------------|-----------------------------------------|----------------|
| etails of hire  | - Send Weekly<br>charges<br>ractor:     |                |                                         |                                         |                |
| lame of cont    | ractor:                                 | Homeline Infra |                                         |                                         |                |
| ompany nan      | ne:                                     | MCMET          |                                         |                                         |                |
| roject name:    |                                         | Manilal Modi m | emorial Hospital.                       | .,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,, |                |
| Note:           | *************************************** | 01.10.2020     |                                         |                                         |                |
| Date:<br>Period |                                         | From:          | 24.09.2020                              | To:                                     | 30.09.2020     |
| enoa            |                                         |                |                                         |                                         |                |
| CI N.           | Equipment Type                          | Quantity       | Rate                                    | Units                                   | Amount         |
| Sl. No.         | Equipment Type                          |                |                                         |                                         | -              |
| 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              |                                         |                |                                         |                                         | -              |
| 1               | Total                                   |                |                                         |                                         |                |
| P               | ayment approved by MD:                  |                |                                         |                                         | MDs approval   |
| Prepared by     | <i>I</i> :                              |                |                                         |                                         | TAILS approval |
| Name F          | ushpalatha                              |                |                                         |                                         |                |
| Date            | 1,10,2020                               |                |                                         |                                         |                |

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| Approved by:                            |
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