

FORM C

FORMAT OF REGISTER OF LOAN/ RECOVERIES

Name of Establishment BCL SECURE PREMISES PVT. LTD. Name of Owner SUJIT KANORIA LIN 1-1115-7840-9

For the Period From 1 Sep 2022 To 30 Sep 2022

| Sl. Number In Employee register | Name | Recovery Type (Damage/loss/f ine/advance/lo ans | Particulars | Date of damage/Loss* | Amount | Whether show cause issued* | Explanation heard in presence of* | Number of Instalments | First Month/Year | Last Month/Year | Date of Complete Recovery | Remarks |
|---------------------------------------|--|--|-------------|-------------------------|--------|-------------------------------------|---|--------------------------|---------------------|--------------------|---------------------------------|---------|
| 1 | 2 | 3 | 4 | 5 | 6 | 7 | 8 | 9 | 10 | 11 | 12 | 13 |
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| | No any damage/loss/fine in the month of OCT 2022 | | | | | | | | | | | |
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For BCL Secure Premises Pvt. Ltd.

Authorised Signatory