

SHEET FOR RECORDING VERIFICATION REMARKS BY THE VERIFYING AUTHORITY

Name of Department/ Establishment : **LABOUR**

Date of Physical Verification :

Sl. No.	Name of Employee	Designation	Scale pay or fixed wages	Date of Appointment	Copy of Appointment Order	PID	Remarks by Verifying Authority
1	2	3	4	5	6	7	8
1	Shri. Babu	Driver	Fixed	As furnished by the dept.	(New A/order) Enclosed	✓	Resigned & Replaced by Mayigapang waf 1-4-16
2	Shri. Mhasikotuo Tsira	Driver	Fixed	- do -	Produced	✓	Verified.
3	Shri. Surjay	Driver	Fixed	- do -	New A/order Enclosed.	✓	Resigned & Replaced by Papu Kumar. waf 1-4-16
4	Shri. Veseto	Driver	Fixed	- do -	Produced	✓	Verified.
5	Shri. Arjun Sonar	Driver	Fixed	- do -	Produced	✓	Verified.

Name, Designation & Signature of Departmental Representative :

Name & Signature of Verifying Team Members :

1. *[Signature]* 20/04

2. *[Signature]* 20/04/16
Vikash Nair
CHAKHESANG

3. *[Signature]* 20/4/16
(Y. METCHU)

4. *[Signature]* 20/4/16
SELICHUM THONGTAN

5. *[Signature]* 20/4/16
(MOANDOK)

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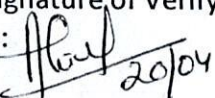
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Date of Physical Verification :

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1	2	3	4	5	6	7	8
6	Shri. Inagha	Peon	Fixed	- do -	Produced	✓	Verified.
7	Shri. Monoba	Driver	Fixed	- do -	New A/O enclosed	✓	Resigned & Replaced by . Orenvungo Kikon. Waf 1-4-16
8	Smti. Neichutuo-u	Mali	Fixed	- do -	Produced		PID not produced.
9	Smti. Y. Amenla	Mali	Fixed	- do -	New A/O enclosed.	✓	PID not produced. Resigned & Replaced by Langkai Konyak. Waf 1-4-16
10	Smti. Arenla	Sweeper	Fixed.	- do -	produced.		PID not produced

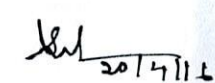
Name, Designation & Signature of
Departmental Representative :

Name & Signature of Verifying Team
Members :

1.  20/04
(AKUND S. MEYAKE)

2.  20/4/16
(VERKHOTSE CHAKHESANG)

3.  20/4/16
(Y. METCHUM)

4.  20/4/16
(SELICHUM SITONGTJAM)

 20/4/16
(MOANOK)