Approval No. 6672/P3/Chairman, dt. 5-10-06

HEALTH DEPARTMENT

MUSTER ROLL No. 3385 (From 1-12-06 To 31-12-06)

(29) Daily wages (Sk.s/L.B.)
Cont. sheet No. 6.

Circle No. VIII Voucher No. 46/H 9/1/07 Dated 9/1/07

In continuation of Muster Roll No. 3353

10/1/07

PART-NOMINAL-ROLL

Accountant (HG)

CHIEF MEDICAL OFFICER

S.No.	Name, Father's/Husband's Name & Address grouped according to classes	Designation	Dates From ... To ... (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)	Total	Rate Rs. P.	Amount Rs. P.	Sign. or thumb impression of payee and dated initials of paying officer made at the time of payment
26	Sh. Kuldeep Singh s/o Sh. Ranjeet Singh 11/166. Babu Dham N-D	K/m.	P P S P P P P P P S P P P P P P P P P P P P P S P P P P P S	26	425.80 + T.A	8227.00 / 3337.00	Kuldeep
27	Smt. Indiswati w/o Sh. Laishan J. J. Camp Mohalla Dhanda Mkt N-D.	S/K.	~~S S S~~ 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 S	~~23~~ 23	do	2952.00	Indiswati
28							
29							

Daily Total 35 28 S 27 26 26 26 37 27 S 26 26 37 27 27 21 26 S 27 27 27 27 27 27 S 26 27 27 27 27 27 S 69 100 G. Total 88559.00

Initials of person marking the daily attendance

Initials of Inspecting Officer

Pay Rs. 88559=00 (Rupees Eighty Eight Thousand five Hundred Fifty Nine Only)

(M. C. MISHRA)
AAO (Public Health)
M.C.D., Palika Kendra

Accountant (HG)

M.O.H. Sr. A.O (PH)

Certified that the workers mentioned in the muster roll were actually employed by me on NDMC work(s) and they were actually paid on my identification in my presence.

Grand Total of this Muster Roll ... ...

Deduct-Payment made, as per details transferred to Register of Unpaid Wages

Total amount paid (in words) Rupees.....Balance Paid

Rs. P.

PAID IN full

Approval No. 6072/P3/Ch—, dt. 5-10-06

(29) Daily wager S.K.S/L.S.O
Cond. sheet No. 5.

HEALTH DEPARTMENT

MUSTER ROLL No. 3385 (From 1-12-06 To 31-12-06)

Circle No. VIII Voucher No. Dated.

In continuation of Muster Roll No. 3383

Accountant (HG) CHIEF MEDICAL OFFICER

PART-NOMINAL-ROLL

Dates From.......... To..........

S.No.	Name, Father's/Husband's Name & Address grouped according to classes	Designation	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	Total	Rate Rs.	Rate P.	Amount Rs.	Amount P.	Sign. or thumb impression of payee and dated initials of paying officer made at the time of payment
			19	20	20	20	19	19	19	20	20	20	19	19	20	20	19	19	20	20	20	20	20	20	20	20	19	20	20	20	20	20	20						
21	Sh. Naveen S/o Sh.	Y/B	P	P	S	P	P	P	P	P	P	S	P	P	P	P	P	P	S	P	P	P	P	P	P	S	P	P	P	P	P	P	S	511 dy / 26 dy	12580 +C.A		65585 / 3337	50 / 00	Naveen Kumar
22	Sh. Vishal S/o Sh.		P	P	S	P	P	P	P	P	P	S	P	P	P	P	P	P	S	P	P	P	P	P	P	S	P	P	P	P	P	P	S	26 dy	do		3337	00	Vishal
23	Smt Raj Rani W/o Sh.		P	P	S	P	P	P	P	P	P	S	P	P	P	P	P	P	S	P	P	P	P	P	P	S	P	P	P	P	P	P	S	26 dy	do		3337	00	राज रानी Raj Rani
24	Smt Sheela W/o		P	P	S	P	P	P	P	P	P	S	P	P	P	P	P	P	S	P	P	P	P	P	P	S	P	P	P	P	P	P	S	26 dy	do		3337	00	शीला Sheela
25	Sh. Rajesh S/o Nephey Singh		P	P	S	P	P	P	P	P	P	S	P	P	P	P	P	P	S	P	P	P	P	P	P	S	P	P	P	P	P	P	S	26 dy	do		3337	00	राजेश Rajesh
	Daily Total		24	25	S	25	24	24	24	25	25	S	24	24	25	25	24	24	S	25	25	25	25	25	25	S	24	25	25	25	25	25	S	641	G. Total		82,270	00	
	Initials of person marking the daily attendance																																						
	Initials of Inspecting Officer																																						

Pay Rs.......................... (Rupees..........................)

Accountant (HG) M.O.H. Sr. A.O.

Grand Total of this Muster Roll ... ...

Rs.	P.

Certified that the workers mentioned in the muster roll were actually employed by me on NDMC work(s) and they were actually paid on my identification in my presence.

Deduct-Payment made, as per details transferred to Register of Unpaid Wages

Approval No. 6072/PS/Chairperson, dd-5-10/06

HEALTH DEPARTMENT

MUSTER ROLL No 3385 (From 1-12-06 To 31-12-06)

(29) Daily wages D.Ks/C.Ks Cont. sheet No. 4.

Circle No. VIII Voucher No. Dated

In continuation of Muster Roll No. 3358

PART-NOMINAL-ROLL

Accountant (HG) CHIEF MEDICAL OFFICER

S.No.	Name, Father's/Husband's Name & Address grouped according to classes	Designation	Dates From ... To ... (1/14 2/15 3/15 4/15 5/14 6/14 7/14 8/15 9/15 10/15 11/14 12/14 13/15 14/15 15/14 16/14 17/15 18/15 19/15 20/15 21/15 22/15 23/15 24/15 25/14 26/15 27/15 28/15 29/15 30/15 31/15) Total	Rate Rs. P.	Amount Rs. P.	Sign. or thumb impression of payee and dated initials of paying officer made at the time of payment
16	Smt Annu w/o		26dy	125.80 + C.A	48,900.00 / 3337.00	
17	Smt Kusum w/o		26dy	do	3337.00	
18	Sh: Ritesh s/o		26dy	do	3337.00	
19	Sh: Parmod s/o		26dy	do	3337.00	
20	Sh: Vikas s/o		26dy	do	3337.00	
	Daily Total		511	G. Total	65,585.00	
	Initials of person marking the daily attendance					
	Initials of Inspecting Officer					

Pay Rs. ..... (Rupees .....)

Accountant (HG) M.O.H. Sr. A.O.

Grand Total of this Muster Roll ... ...

Deduct-Payment made, as per details transferred to Register of Unpaid Wages

Rs.	P.

Certified that the workers mentioned in the muster roll were actually employed by me on NDMC work(s) and they were actually paid on my identification in my presence.

Approval No. 6072/PS/Chairperson, 5-10-06

HEALTH DEPARTMENT

MUSTER ROLL No. 3385 (From 1-12-06 To 31-12-06)

(29) Dailywages S.Ks/L.Bs
Cont. Sheet No. 3.

Circle No. VIII Voucher No. ..... Dated .....

In continuation of Muster Roll No. 3353

PART-NOMINAL-ROLL

Accountant (HG) CHIEF MEDICAL OFFICER

S.No.	Name, Father's/Husband's Name & Address grouped according to classes	Designation	Dates From ..... To ..... (Dt.) 1 9	2 10	3 10	4 10	5 9	6 9	7 9	8 10	9 10	10 10	11 10	12 10	13 10	14 10	15 9	16 9	17 10	18 10	19 10	20 10	21 10	22 10	23 10	24 10	25 10	26 10	27 10	28 10	29 10	30 10	31 10	Total	Rate Rs. P.	Amount Rs. P.	Sign. or thumb impression of payee and dated initials of paying officer made at the time of payment
11	Sh Ratan S/o	YB	P	P	S	P	P	P	P	P	P	S	P	P	P	P	P	P	S	P	P	P	P	P	P	S	P	P	P	P	P	P	S	26 dy	125.80 + L.A	32,600.00 3337.00	
12	Sh. Rajkrishna Pyare Lal	YB	P	P	S	P	P	P	P	P	P	S	P	P	P	P	P	P	S	P	P	P	P	P	P	S	P	P	P	P	P	P	S	26 dy	do	3337.00	Raj Kumar
13	Sh. Sunil S/o Sh. Subhay	YB	P	P	S	P	P	P	P	P	P	S	A	A	P	P	P	P	S	P	P	P	P	P	P	S	A	P	P	P	P	P	S	23 dy	do	2952.00	
14	Sh. Manoj Kr S/o Sh. Sundar Lal	YB	P	P	S	P	P	P	P	P	P	S	P	P	P	P	P	P	S	P	P	P	P	P	P	S	P	P	P	P	P	P	S	26 dy	do	3337.00	
15	Sh. Vipin Kr S/o Nanak Chand	YB	P	P	S	P	P	P	P	P	P	S	P	P	P	P	P	P	S	P	P	P	P	P	P	S	P	P	P	P	P	P	S	26 dy	do	3337.00	
	Daily Total		14	15	S	15	14	14	14	15	15	S	14	14	15	15	14	14	S	15	15	15	15	15	15	S	14	15	15	15	15	15	S	381	G. Total	48,900.00	
	Initials of person marking the daily attendance				S							S							S							S							S				
	Initials of Inspecting Officer				S							S							S							S							S				

Pay Rs. ..... (Rupees .....)

Accountant (HG) M.O.H. Sr. A.O.

Certified that the workers mentioned in the muster roll were actually employed by me on NDMC work(s) and they were actually paid on my identification in my presence.

Grand Total of this Muster Roll ... ...

Deduct-Payment made, as per details transferred to Register of Unpaid Wages

Total amount paid (in words) Rupees ..... Balance Paid

Rs.	P.

Approval No. 6072/PS/Champ, dt- 5-10-06

HEALTH DEPARTMENT

MUSTER ROLL No. 3385 (From 1-12-06 To 31-12-06)

(29) Dailywages D.Ks/L.Ds Cont- sheet No. 2.

Circle No. VIII Voucher No. ..... Dated .....

In continuation of Muster Roll No. 3353

PART-NOMINAL-ROLL

Accountant (HG) CHIEF MEDICAL OFFICER

S.No.	Name, Father's/Husband's Name & Address grouped according to classes	Designation	Dates From ..... To 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	Total	Rate Rs. P.	Amount Rs. P.	Sign. or thumb impression of payee and dated initials of paying officer made at the time of payment
6	Sh. Vipin & Sh. Suresh Kr.	L/B	P	P	S	P	P	P	P	P	P	S	P	P	P	P	P	P	S	P	P	P	P	P	P	S	P	P	P	P	P	P	S	26 dy	125.80 + C.A	16,685.00 3337.00	Vipin
7	Sh. Sachin & Kanwar Singh	L/B	P	P	S	P	P	P	P	P	P	S	P	P	P	P	P	P	S	P	P	P	P	P	P	S	P	P	P	P	P	P	S	26 dy	do	3337.00	Sachin
8	Sh. Parmod & Laxman Singh		P	P	S	P	P	P	P	P	P	S	P	P	P	P	P	P	S	P	P	P	P	P	P	S	P	P	P	P	P	P	S	26 dy	do	3337.00	
9	Sh. Mahesh & Budh Ram Singh		P P P	P P	S	P P	P P	P P	P P	P P	P	S	P P P	P P	P P	P P	P	P	S	P P P	P P	P P	P P	P P	P	S	P P P	P P	P P	P P	P	P	S	26 dy	do	3337.00	
10	Sh. Ram Dass & Birham		A	P P P	S	P P	A A	A	A	P P	P P	S	P P P	P P	P P	P	A	A	S	P P P	P P	P P	P P	P P	P	S	P P P	P P	P P	P P	P	P	S	20 dy	do	2567.00	
	Daily Total		9	10	S	10	9	9	9	10	10	S	10	10	10	10	9	9	S	10	10	10	10	10	10	S	10	10	10	10	10	10	S	254	G. Total	32,600.00	
	Initials of person marking the daily attendance				S							S							S							S							S				
	Initials of Inspecting Officer				S							S							S							S							S				

Pay Rs. ..... (Rupees .....)

Accountant (HG) M.O.H. Sr. A.O.

Certified that the workers mentioned in the muster roll were actually employed by me on NDMC work(s) and they were actually paid on my identification in my presence.

Grand Total of this Muster Roll ... ...

Deduct-Payment made, as per details transferred to Register of Unpaid Wages

Total amount paid (in words) Rupees ..... Balance Paid

Rs.	P.

Approval No. 6072/PS/Chairperson, dt. 5-10-06

HEALTH DEPARTMENT

MUSTER ROLL No. 3385 (From 1-12-06 To 31-12-06)

(29) Dailywager Sk/L.BS
Only six sheets (1+5=6)

Circle No. VIII Voucher No. ..... Dated .....

In continuation of Muster Roll No. 3353

PART-NOMINAL-ROLL

Accountant (HG) CHIEF MEDICAL OFFICER

S.No.	Name, Father's/Husband's Name & Address grouped according to classes	Designation	Dates From ..... To ..... (Dt.) 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	Total	Rate Rs. P.	Amount Rs. P.	Sign. or thumb impression of payee and dated initials of paying officer made at the time of payment
1	SH. Bijender Pal S/o SH. Ray Pal		P P P	P P P	S	P P P	P P P	P P P	P P P	P P P	P P P	S	P P P	P P P	P P P	P P P	P P P	P P P	S	P P P	P P P	P P P	P P P	P P P	P P P	S	P P P	P P P	P P P	P P P	P P P	P P P	S	26 dy	125.80 + C.A	3337.00	Bijender
2.	SH. Sandeep S/o Rajender		P	P	S	P	P	P	P	P	P	S	P	P	P	P	P	P	S	P	P	P	P	P	P	S	P	P	P	P	P	P	S	26 dy	do	3337.00	Sandeep
3.	SH. Deepak S/o SH. Rajender Sr		P	P	S	P	P	P	P	P	P	S	P	P	P	P	P	P	S	P	P	P	P	P	P	S	P	P	P	P	P	P	S	26 dy	do	3337.00	Deepak
4	SH. Deepu S/o SH Rajender Sr		P	P	S	P	P	P	P	P	P	S	P	P	P	P	P	P	S	P	P	P	P	P	P	S	P	P	P	P	P	P	S	26 dy	do	3337.00	Deepu
5.	Smt. Saroj S/o Ravinder		P P P	P P P	S	P P P	P P P	P P P	P P P	P P P	P P P	S	P P P	P P P	P P P	P P P	P P P	P P P	S	P P P	P P P	P P P	P P P	P P P	P P P	S	P P P	P P P	P P P	P P P	P P P	P P P	S	26 dy	do	3337.00	Saroj
	Daily Total		S	S	S	S	S	S	S	S	S	S	S	S	S	S	S	S	S	S	S	S	S	S	S	S	S	S	S	S	S	S	S	130	G. Total	16,685.00	
	Initials of person marking the daily attendance				S							S							S							S							S				
	Initials of Inspecting Officer				S							S							S							S							S				

Pay Rs. ..... (Rupees .....)

Accountant (HG) M.O.H. Sr. A.O.

Certified that the workers mentioned in the muster roll were actually employed by me on NDMC work(s) and they were actually paid on my identification in my presence.

Grand Total of this Muster Roll ... ...

Deduct-Payment made, as per details transferred to Register of Unpaid Wages

Total amount paid (in words) Rupees ..... Balance Paid

Rs.	P.