

Appoint No. 4888/10/Chairperson, dt-7.8.06

HEALTH DEPARTMENT

From 1-1-07 To 31-1-07

(38) Daily wages S.K/L.R.S
Cont. sheet No. 6.

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

In continuation of Muster Roll No. 3371

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																															Rate	Amount	Sign. or thumb impression of payee and dated initials of paying officer made at the time of payment	
			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				
31	Sh. Harish s/o Sh. Renu Bal 318 Dabli Stoti Ailgane		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	P	P	P	P	P	26 days	
32	Sh. Ravi s/o Sh. Pahlad S-207 P.K. Puran Camp Sec-6 N.V.A.		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	P	P	P	P	10 days		
33	Sh. Naresh K/s s/o Late Sh. Chhetri D-293 Sui. 2-angam Ran 21-22-1		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	P	P	P	P	27 days		
34	Sh. Rajesh s/o Sh. Baldev Lal E-Block Ailgane GRT		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	P	P	P	22 days			
35	Sh. Ashok s/o Sh. Ram Singh Ailgane T-24 T 563/AH 20/1/07 219 T 563/AH 20/1/07 219 amul/ram singh		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	P	P	P	P	21 days		
36	Sh. Vijay s/o Sh. Om Shankar B-252 Dabli Stoti Ailgane Puran 62		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	P	P	P	P	21 days		
		Daily Total																																G: Total	110808	110937	

Pay Rs. (Rupees)

Initials of person marking the daily attendance
Initials of Inspecting Officer

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

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

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. 4808/85/Chairperson, dt. 7-8-06

HEALTH DEPARTMENT

MUSTER ROLL NO. 3404

(From 1-1-07

To 31-1-07)

(30) Chairperson - R.K.J.C.S. Cont. Sheet No. 4.

Circle No. X Voucher No. 3371

Dated

In continuation of Muster Roll No. 2371

PART-NOMINAL-ROLL

Accountant (HG),

5635 CHIEF MEDICAL OFFICER

S.No.	Name, Father's/Husband's Name & Address grouped according to classes	Designation	Dates From: To																															Daily Total	Initials of person marking the daily attendance	Initials of Inspecting Officer	Rate Rs. P.	Amount Rs.	Sign. or thumb impression of payee and dated initials of paying officer made at the time of payment						
			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												
195	Sh. Rajiv Sh. K. Mewar H-1660 Balni Ki Baghi Mumbai Mumbai. Gen. Delhi		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	P	P	P	P	P	P	P	185.80	3463.40	21119					
200	Sh. Saughey Sh. Banshan Lal R-14 Tiger J.S. Camp Kana Puz-N.D.		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	P	P	P	P	P	P	P	25 days	3206.00	21174					
210	Sh. Gurdeep Sh. Malvishi Rain H-100 263 Sh. Right Colony 100/1 Kanan Maharami Bag.		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	P	P	P	P	P	P	P	27 days	3463.00	3463					
220	Sh. Lalit Sh. Indes Lal Uaeji Shardaon. Mawdi Mawg. Nava. Jalin.		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	P	P	P	P	P	P	27 days	3463.00	3463						
230	Sh. Smt. Daryawati Sh. Tej Lal A-16 Tiger J.S. Camp Kana Puz-N.D.		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	P	P	P	P	P	P	18 days	2308.00	2308						
240	Sh. Sh. Saughey Sh. Sultan Singh		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	P	P	P	P	P	P	19 days	2052.00	2052						
																																							570	74258					
																																											G. Total	74387	

Pay Rs. (Rupees)

Rs. P.

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

HEALTH DEPARTMENT

MUSTER ROLL NO. 3404

(From 1-1-07 To 31-1-07)

Circle No. X Voucher No. 331 Dated

PART-NOMINAL-ROLL

S.No.	Name, Father's/Husband's Name & Address grouped according to classes	Designation	Dates From To																															Rate Rs. P.	Amount Rs.	Sign. or thumb impression of payee and dated initials of paying officer made at the time of payment
			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			
13	Sud. Chandraswati w/o Sh. Ashok K. 405 Balika Shram Dale, Munkat N.D.	Ka	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	P	P	P	P	P	P
			Total																															425.80 + A	1929	(Signature)
14	Sh. Anil Duggal Sh. Sabya Paskauly, H.no 10-A/10205 Gulmoo S Park Road, 100 Quarter, Green Road - 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	P	P	P	P	P	P
			Total																															2693	2693	(Signature)
15	Sh. Arun Sh. Royendra H.no T/910 Harijan camp, Marechandi. near Red Badli Road.		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	P	P	P	P	P	P
			Total																															1524	1524	(Signature)
16	Sh. Virendra Sh. Chawan main bel H.no 4197 Gullimoo II A Road, Mangal Shilam Pur New Delhi-31		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	P	P	P	P	P	P
			Total																															2308	2308	(Signature)
17	Sh. Son Nath Sh. Late Sh. Jagji Ram Bavurni village N.D.		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	P	P	P	P	P	P
			Total																															2740	2740	(Signature)
18	Sh. Vikram Sh. Late Sh. Kishan Lal Mole Chishmi dist. Sonam. Haripur.		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	P	P	P	P	P	P
			Total																															430	430	(Signature)
Pay Rs. (Rupees)			Grand Total of this Muster Roll																															G. Total	56432	(Signature)

Accountant (HG)

CHIEF MEDICAL OFFICER

Signature of Chief Medical Officer
Comdr Asst No. 5.

Accountant (HG) M.O.H. Sr. A.O. Grand Total of this Muster Roll

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

Total amount paid (in words) Rupees Balance Paid

Rs. P.

