

# HEALTH DEPARTMENT

## MUSTER ROLL NO. 3415

Circle No. V Voucher No. 67/H Dated 12/10/07  
 In continuation of Muster Roll No. 3382 (From 1-1-07 To 30-1-07)

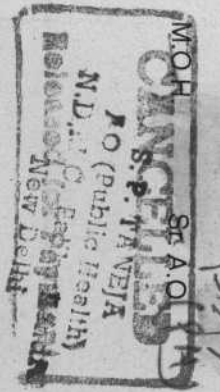
### PART-NOMINAL-ROLL

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				
11	Dr. Arund S/O. Shri's Sonet Navelsangy Golem.	Dr. Arund S/O. Shri's Sonet	[Attendance marks]																															41	Rs. 15000	Rs. 166700	[Signature]
18	Dr. Rohit S/O. Ashok Navelsangy Golem.	Dr. Rohit S/O. Ashok	[Attendance marks]																															41	Rs. 16000	Rs. 205200	[Signature]
19	Dr. Kamran Khan S/O. Miran Khan Navelsangy	Dr. Kamran Khan S/O. Miran Khan	[Attendance marks]																															41	Rs. 243700	Rs. 243700	[Signature]
20A	Sosnil s/o. Mrs. Ramdas Vice Dr. Mukesh s/o Dr. Surej Ram.	Sosnil s/o. Mrs. Ramdas	[Attendance marks]																															41	Rs. 141000	Rs. 141000	[Signature]

Accountant (HG)

CHIEF MEDICAL OFFICER

Pay Rs. 44630 (Rupees) Forty Four Thousand Sixty Three Only  
 Initials of Inspecting Officer [Initials]  
 Verified for Cash/Cheque Payment  
 Sanitation Officer [Signature]



Grand Total of this Muster Roll ...  
 Deduct-Payment made, as per details transferred to Register of Unpaid Wages  
 Total amount paid (in words) Rupees Forty Four Thousand Sixty Three Only  
 Balance Paid  
 S No 1 to 20 of Rs 8000  
 July 2007 Bill 7 ml  
 [Signatures]

### HEALTH DEPARTMENT

# MUSTER ROLL NO. 3415

(From 1-1-07 To 22-1-07)

20 Daily wages SIKs 1.30  
Cont. sheet No. 2.

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

In continuation of Muster Roll No. 3389.

#### 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 Rs. P.	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					
11	Smt Remu w/o Remu Kupmas Old No. 31- 98 Thakurpur	SIK	MP	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 day	Rs. 11	2437.00		
12	Sh. Hazi Kaval S/Satya Masain 10/1 Malu Road Johnpur	SIK	H	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 day	Rs. 11	2437.00			
13	Sh. Rakesh S/O Mand Kishor 11/1 Agarnal Calcut. Kendras Rajwara	SIK	H	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 day	Rs. 11	2437.00			
14	Sh. Rahul Parashar S/O Ved Parashar H/O Matola, Kandi, Kandi	SIK	H	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 day	Rs. 11	2437.00				
15	Sh. Amit S/O Sakr Chand H/O-188 Harijain Bar Mandir Naya, D.O. Kandi	SIK	H	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 day	Rs. 11	2108.00				
		Daily Total																																2750/11	Rs. P.	3528.99		
		Initials of person marking the daily attendance																																			35397	
		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

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

Rs. P.

## HEALTH DEPARTMENT

### MUSTER ROLL NO. 3415

(From 1-1-07 To 22-1-07)

(Signature: S.K.S.L.B.)  
Only Four sheets.

Circle No. V Voucher No. 3389  
In continuation of Muster Roll No. 3389

#### 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					
6	Sh. Sangar S/o Ranjed Khan HTI, Gajakabin, Tom D. D. m. r.	SIK	PP	PP	PP	PP	PP	PP	PP	PP	PP	PP	PP	PP	PP	PP	PP	PP	PP	PP	PP	PP	PP	PP	PP	PP	PP	PP	PP	PP	PP	PP	PP	PP	19 day	11	2437.00	[Signature]
7	Sh. Sandip S/o Bhaxam Palt. P-255 Gali No 1 Akhil Nagar Shachana Delling	SIK	PP	PP	PP	PP	PP	PP	PP	PP	PP	PP	PP	PP	PP	PP	PP	PP	PP	PP	PP	PP	PP	PP	PP	PP	PP	PP	PP	PP	PP	PP	PP	PP	18 day	11	2308.00	[Signature]
8	Sh. Vikram S/o Shazi Karmal 85/213 lady Handing Staff Qu. Near scale Market Market @ New Delhi I	SIK	PP	PP	PP	PP	PP	PP	PP	PP	PP	PP	PP	PP	PP	PP	PP	PP	PP	PP	PP	PP	PP	PP	PP	PP	PP	PP	PP	PP	PP	PP	PP	PP	19 day	11	2437.00	[Signature]
9	Sh. Manish S/o Sant Lal 631513 -13, 4th 4 u zis 151 c 177 2/12 2/12 D. D. m. r.	SIK	PP	PP	PP	PP	PP	PP	PP	PP	PP	PP	PP	PP	PP	PP	PP	PP	PP	PP	PP	PP	PP	PP	PP	PP	PP	PP	PP	PP	PP	PP	PP	PP	17 day	11	2180.00	[Signature]
10	Sh. Azam S/o Bhaxam chad c 177 2/12 2/12 D. D. m. r.	SIK	PP	PP	PP	PP	PP	PP	PP	PP	PP	PP	PP	PP	PP	PP	PP	PP	PP	PP	PP	PP	PP	PP	PP	PP	PP	PP	PP	PP	PP	PP	PP	17 day	11	2180.00	[Signature]	
			Daily Total																															18 day	11	2321.50	[Signature]	
			Initials of person marking the daily attendance																															19 day	11	2334.11	[Signature]	
			Initials of Inspecting Officer																															19 day	11	2334.11	[Signature]	

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

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.

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

Rs.

P.

Approval No. 6079/PS/Chairperson, dated 5.10.06

# HEALTH DEPARTMENT

## MUSTER ROLL NO. 3413

(From 1-1-07 To 22-1-07)

Circle No. V Voucher No. 3388  
 In continuation of Muster Roll No. 3388 Dated .....

### 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.....																															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	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										
1	Sh. Nand Lal S/o Mangat Ram E-7314 385 21st St. Noida 21/11/11	THK SIR	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	P	P	19day	12580 + CA	243700	(Signature)
2	Smt. Bena W/o Faruk Chand P. N.T. Colony H/30 New 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	P	P	19day	"	243700	(Signature)
3	Sh. Vikash S/o Rajeev 80, E-12 St. 1st N.T. Noida	"	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	P	P	17day	"	218000 + 3000	(Signature)
4	Sh. Meher Sh S/o Shyam Lal Gr No 4 Paltan Sada Hazratpur Mathura U.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	P	P	P	19day	"	243700	(Signature)
5	Sh. Meherendra S/o Chegu Ram 318 NOY NOY	"	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	P	P	17day	"	218000	(Signature)
		Daily Total																																91day	G. Total	1167100							

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

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.
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(Signature) 20 Daily wages Sika/L.Ra  
 Cont. Sheet No. 4.