O.O. No. D/981/C.M.O. (HQ), dt. 8-1-07

# HEALTH DEPARTMENT

## MUSTER ROLL NO. 344.a (From 24-1-07 To 31-1-07)

(25) Daily wager S.K.S/L.B.S
Cont. sheet No. 5

Circle No. XIV Voucher No. 112/H Dated 13/2/07

In continuation of Muster Roll No. Fresh

PART-NOMINAL-ROLL

Accountant (HG) | CHIEF MEDICAL OFFICER

| S.No. | Name, Father's/Husband's Name & Address grouped accrding 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 |
|---|---|---|---|---|---|---|---|
| 19 | Sunder Lal S/o Beli | Daily wager S/K | P P H P P P

O.O. No. D/921/C.M.O. (HQ), dt. 8-1-07

# HEALTH DEPARTMENT

## MUSTER ROLL NO. 3440 (From 24-1-07 To 31-1-07)

(23) Sailyuragar S.K.S/2.B.S
Cont. sheet No. 4.

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

In continuation of Muster Roll No. Fresh

PART-NOMINAL-ROLL

Accountant (HG) | CHIEF MEDICAL OFFICER

| S.No. | Name, Father's/Husband's Name & Address grouped accrding 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 |
|---|---|---|---|---|---|---|---|
| 17 | Sh. Ram Gopal S/o Sh. Phatehsingh | Dailyw. | P P P A R P P P P P P P P P | 06 days | 125 + CA | 769 Part | Sig Pltd |
| 18 | Sh. Lalit Verma S/o Mukesh Chand | d. | P P P A P P R P P P P P P | 06 days | 71 | 769 Part | Sig Pltd |
| | | | | Daily Total | 114 | G. Total 1462 | |
| | | | | Initials of person marking the daily attendance | | | |
| | | | | Initials of Inspecting Officer | | | |

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.

| | Rs. | P. |
|---|---|---|
| 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 | | |

O.O. No. D/931/C.M.O.(HQ), dt. 8-1-07

# HEALTH DEPARTMENT

## MUSTER ROLL NO. 3440 (From 24-1-07 To 31-1-07)

(23 Daily wagers @ Rs 1/- 2.50 Cont. Sheet No 3.)

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

In continuation of Muster Roll No. Fresh

Accountant (HG), CHIEF MEDICAL OFFICER

**PART-NOMINAL-ROLL**

| S.No. | Name, Father's/Husband's Name & Address grouped accrding 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 |
|---|---|---|---|---|---|---|---|
| 12 | Sh. Vikash S/o Sh. Suresh Pal | Daily wg | P P P P P P P P P P P P P P P | 07 days | 12.80 | 898 Paid | Vikash Kumar Sig Attd |
| 13 | " Amit Kr S/o " Raj Pal | " | P P H P P P P P P P P P P P | 07 days | " | 898 Paid | Sig Attd |
| 14 | Sandeep S/o Jai Kishan | | P P H P P P P P P P P P P R | 06 days | " | 769 Paid | Sig Attd |
| 15 | Sagar S/o Kartar Singh | | P P H P P P P P P P P P P P | 07 days | " | 898 Paid | Sig Attd |
| 16 | Jagjindar S/o Rattan Singh | | P P H P P P P P P P P P P P | 08 days | " | 1026 Paid | Sig Attd |
| | Daily Total | | | 102 | G. Total | 13083 | |
| | Initials of person marking the daily attendance | | | | | | |
| | Initials of Inspecting Officer | | | | | | |

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. |
|---|---|
| | |

O.O. No. 981/C.M.O. (HQ), dt. 8-1-07

# HEALTH DEPARTMENT

## MUSTER ROLL NO. 3440 (From 24-1-07 To 31-1-07)

(23) Daily wager S.K.S/L-Bs Cont. sheet No. 2.

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

In continuation of Muster Roll No. Fresh

PART-NOMINAL-ROLL

Accountant (HG) CHIEF MEDICAL OFFICER

| S.No. | Name, Father's/Husband's Name & Address grouped accrding 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 |
|---|---|---|---|---|---|---|---|
| 7 | Sh. Rohit S/o Islam Chand Elect. Sub Stn Bhalswa | | P P P P P P R P P P P P P P P P P P P P P P P | 7 days | 125=50 +CA | 898 | Rohit By Ally |
| 8 | Rishi S/o Sori Ram old Fern'dulbad. Mtj | | P P P P P P R P P P P P P P P P P P P P P P P | 7 days | " | 898 | By Ally |
| 9 | Dinesh S/o Moti Lal Pahila Sthn. M.Sec | | A P P A P P R P P P P P P P P P P P P P P P P | 5 days | " | 898 641 | By Ally |
| 10 | Smt. Kiran W/o Sh. Vijay Tussi Addl. 12/266, Daxinpuri MD (W/R-FRI) | | P P R P P P P P P P P P P P P P P P P P P P P | 07 days | | 898 | By Ally |
| 11 | Smt. Dayawati W/o Sh. Chander Pal Addl. 114, R.K. Puram Sec-I, Ambedkar Basti MD. (W/R-FRI) | | P P R P P P P P P P P P P P P P P P P P P P P | 07 days. | | 898 | By Ally |
| | Daily Total | | | 67. | G. Total | 8594 | |
| | Initials of person marking the daily attendance | | | | | | |
| | Initials of Inspecting Officer | | | | | | |

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.

| | Rs. | P. |
|---|---|---|
| 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 | | |

O.O. No. D/981/C.M.O. (HQ), dt- 8.1.07

# HEALTH DEPARTMENT

## MUSTER ROLL NO. 3440 (From 24.1.07 To 31.1.07) (23) Daily wager D.K.P.L. Bs Only Five sheets (1+4=5)

Circle No. XIV Voucher No. Dated

In continuation of Muster Roll No. Fresh

PART-NOMINAL-ROLL — Accountant (HG), — CHIEF MEDICAL OFFICER

| S.No. | Name, Father's/Husband's Name & Address grouped acccrding 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 |
|---|---|---|---|---|---|---|---|
| 1. | Anil Kumar s/o Sh. Surat Singh. (MR - Tuesday) Add - 30/172, Trilok Puri Delhi | Daily wager | P P P P P P P P P P P P P A P P P P P P P P P P P P P