O.O. No. D/931/C.M.O.(HQ), dt - 8.1.07

HEALTH DEPARTMENT

MUSTER ROLL NO. ~~3484~~ 3484 (From 1-3-07 To 31-3-07)

(19) Daily wager S.K.B/L.B Cont. Sheet No 4.

Circle No. XIII Voucher No. 2 22/4 Dated 11/4/07

In continuation of Muster Roll No. 3469

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 12 … 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
16	Smt Anita w/o Sh. Subhash			26 days	127.40 + CA	3376	Sig attested
17	Smt Munni w/o Sh Dharampal Aggl.			29 days 23 days		2986	Sig attested
18	Smt Urmila w/o Sh. Dinesh			28 days 25 days		3246	Sig attested
19	Smt Komlesh w/o Ajeet			25 days		3246	Sig attested
	Pay to Sh. Iqbal Rs. 64014 B/F Rs Nil S.P.L. 64014						
	Daily Total		12 19 18 5 18 19 19 19 19 18 5 17 19 19 19 19 19 5 19 16 19 19 19 19 5 17 19 19 19 18 18	493	G. Total	64014-00	
	Initials of person marking the daily attendance						
	Initials of Inspecting Officer						

Pay Rs. 64014 (Rupees Sixty four thousand fourteen only)

Serial No 1 to 19 Recd & fully bill all signature Esti Pti attested

Grand Total of this Muster Roll ... Rs. 5100 P.

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

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

Accountant (HG)

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.

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

CANCELLED Released for payment

Sanitation Officer Chief Sanitation Inspector

O.O.No. D/981/C.M.O. (HQ), dt-21-07

HEALTH DEPARTMENT

MUSTER ROLL NO. ~~3484~~ 3489 (From 1-3-07 To 31-3-07)

(19) Daily wager D.Ko/LB) Cont- Sheet No. 3.

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

In continuation of Muster Roll No. 3469

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
11	Sh. Vicky S/o Sh. Chander			27 days	127.40 + DA	3506	Sig attested
12	Sh. Amit S/o Jai Kishan			27 days	Do-	3506	Sig attested
13	Sh. Naveen S/o Kanwar Chand			27 days	Do-	3506	Sig attested
14	Sh. Sarvesh Kanwar S/o Sh. Daya Nand			27 days	Do-	3506	Sig attested
15	Sh. Rajender S/o Rattan Lal			24 days	Do-	3116	Sig attested
	Daily Total		17 14 14 5 14 15 15 15 15 14 5 14 15 15 15 15 15 5 15 14 15 15 15 15 5 15 15 15 15 14 14	394	G. Total	51160-00	
	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. 8-2-07

HEALTH DEPARTMENT

MUSTER ROLL NO. ~~3484~~ 3484 (From 1-3-07 To 31-3-07)

(19) Daily wager Sweeper / L.B. Cont. sheet M.R.

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

In continuation of Muster Roll No. 3469

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. Satish S/o Kuldeep																																	27 days	127.40 + CA	3506	Received Sig. attested
7.	Sh. Mukesh S/o Kushi Ram																																	23 days	do	2986	Received Sig. attested
8.	Sh. Sanjay S/o Sh. Ram Karan																																	23 days		2986	Received Sig. attested
9.	Sh. Sanjay S/o Sh. Randhir Singh																																	27 days		3506	Received Sig. attested
10.	Sh. Sonu S/o Jagdish																																	27 days		3506	Received Sig. attested
	Daily Total		8	10	10	5	9	10	10	10	10	9	5	9	10	10	10	10	10	5	10	9	10	10	10	10	5	10	10	10	10	9	9	262	G. Total	34020-00	
	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		

S.O. No. 981/CM.O.(HQ), dt. 8-1-07

HEALTH DEPARTMENT

MUSTER ROLL NO. ~~3484~~ ~~3484~~ 3484 (From 1-3-07 To 31-3-07)

(19) Daily wager D.K.S/L.B.S Only four sheet (1+3=4)

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

In continuation of Muster Roll No. 3469

Accountant (HG), CHIEF MEDICAL OFFICER

PART-NOMINAL-ROLL

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
1.	Smt Ranja W/o Vicky Add- HNo 550 Ram Nagar Colony - Bata chok - Faridabad -	TMR		27 days	127.00 + EA	3506-00	
2.	Smt Rakhi W/o Rakesh Add- HNo 510 Ram Nagar Colony - Bata chock - Faridabad -	do-		27 days	do-	3506-00	
3.	Smt Usha W/o Rajkr - Add- 1479 Darshinpuri N Delhi-62	do-		27 days	do-	3506-00	
4.	Sh. Umesh S/o Sh. Jaikaram Add- S/486 Mangal Puri	do-		27 days	do-	3506-00	
5.	Smt Nirmala W/o Sh. Satish Add- G. 2/6 Madan Gir N. Delhi	do-		27 days	do-	3506-00	
	Daily Total		5 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5	135	G. Total	17,530-00	
	Initials of person marking the daily attendance						
	Initials of Inspecting Officer						

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

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.

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.