HEALTH DEPARTMENT

MUSTER ROLL NO. ..... (From 01-3-2007 To 31-3-2007)

Circle No. IV. Voucher No. 88/4 Dated 16/4/07

In continuation of Muster Roll No. R.M.R.

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
35	श्री सुभाष s/o श्री दर्शी सिंह 147-IS.P.O Parakhlal Pur	S/K	P P P 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/H P P P	26	127.40 +66-00	3633-00 - 45-00 = 3588-00 3761 - 45-00 = 3716	
36	श्री पदम सिंह s/o श्री गुलाम H.N. 9604 Bhagat Singh Nagar Eilmistan.	do	P P P 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/H P P P	25	11	1448-00 - 45-00 = 1403-00 2077 - 45-00 = 2032 -	
37	श्रीमती राजबाला w/o श्री सुखदेव 589 M.C.D Colony Sanj Pur.	do	P P P S/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 S/H P P P	28	11	3633-00 - 45-00 = 3588-00 3761 - 45-00 = 3716 -	
38	श्रीमती उर्मिला w/o श्री ओमप्रकाश 33-Harijan Basti M. Marg The Bill Received at 13/4/07 at 1PM	do	P P P S/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 S/H P P P	28	11	3633-00 - 45-00 = 3588-00 3761 - 45-00 = 3716 -	
			Daily Total	995	G. Total	126878-00 - 1620-00 = 125258-00	
			Initials of person marking the daily attendance	996		128933 - 1620 = 127313	
			Initials of Inspecting Officer			129062 - 1620 = 127442	

Pay Rs. 129062/- (Rupees One Lakh Twenty nine thousand six sixty two only)

Pay to Staff Rs. 127442

B/F Rs. 1620

Staff 129062

S/No 1 To 39 Sign MTI/LT.1

VERIFIED FOR CASH/CHEQUE PAYMENT 13/4/07 Cashier

Accountant (HG) (M. C. MISHRA) M.O.H.

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.

ECR Entry Page 14 to 26

CANCELLED 16040 S. P. TANEJA A.O. (Public Health) N.D.M.C. Palika Kendra New Delhi

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

CNo-4

HEALTH DEPARTMENT

MUSTER ROLL NO. RMRS/K (From 1/3/07 To 31/3/07)

Circle No. 4 Voucher No. Dated

In continuation of Muster Roll No.

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
31	Vinod S/o Sh-Ram Phal, S-28 Harijan Basti.	L/B	P P P P A A P L L P P P P L L L L L L P P P L L P P P P P L L P P P P P

CN-4

(6)

HEALTH DEPARTMENT

MUSTER ROLL NO. RMR S/K (From 1/3/07 To 31/3/07)

Circle No. 4 Voucher No. Dated

In continuation of Muster Roll No.

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
26	Sh. Jai Singh S/o Bhagwan Singh G. 11 Palika Dham.	S/K	P P P P A L P P P P P P P P P P P P P P P P P P P P P P P P P P P	30	127-40 +66-00	3888-00-45-00=	3843-00
27	Sh. Ravi S/o Om Parkesh. Y-955 Mangal Puri.	do	P L L P A A P P P P P P P P P P P P P P P L L L

CNo-4

HEALTH DEPARTMENT

MUSTER ROLL NO. RMPS/K (From 1/3/07 To 31/3/07)

Circle No. 4 Voucher No. Dated

In continuation of Muster Roll No.

66155 - 810 = 65345

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
(21)	Sh. Kirshn S/o Chand Pal.	L/B	L=Loory Duty	27	127-40 +66-00	3506-00-45-00=	3461-00
(22)	Sh. Babu Lal S/o Magtu. 328 Moolchand Colony Adarh Nagar	d/o	L=Loory Duty	27 28 25	11	3116-00-45-00= 3246	3071-00 3201
(23)	Sh. Fagir Chand S/o Sher Singh. B-484 Malambi Kala	d/o	L=Loory Duty	26 27	11	3376-00-45-00= 3506	3331-00 3461
(24)	Sh. Anil S/o Hari Singh F-37 Harijan Basti.	d/o	L=Loory Duty	14 15	11	1818-00-45-00= 1948	1773-00 1903-00
(25)	Sh. Rajesh S/o Rati Ram. H.N.52 Balamiki Basti	S/K		22 23	11	2856-00-45-00= 2986	2811-00 2941
	Daily Total			627	G. Total	74548-00-1035-00= 81090 - 1035	78513-00 80055
	Initials of person marking the daily attendance						
	Initials of Inspecting Officer					81347 - 1035 =	80312

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.

EN.-9

(4)

HEALTH DEPARTMENT

MUSTER ROLL NO. RMP S/K (From 1/3/07 To 31/3/07)

Circle No. 4 Voucher No. Dated.

In continuation of Muster Roll No.

48378 - 585 = 47793

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
(16)	Smt Usha w/o Karm Chand Ranjeet Nagar New mother Dairy.	S/K	A H A A A A A A A A A A A A A A A A A A A A A A A A A A A A A	29	127-00 +66-00	3116-00 - 45-00 = 3071-00	
(17)	Sh. Sunil S/o Jaswant B-54 Block. 31 Tirlok Puri.	LB	H L=Leave Duty	28 29	11	3633-00 - 45-00 = 3588-00 3761 - 45 = 3716	
(18)	Sh. Suresh S/o Sommey BE-86 Hari Nagar.	-do-	L=Leave Duty	27	11	3506-00 - 45-00 = 3461-00	
(19)	Sh. Nerash S/o Gusa Ram 6-1 A(PNT) OP Kali Bard marg	-do-	L=Leave Duty	29	11	3761-00 - 45-00 = 3716-00	
(20)	Sh. Suresh S/o Mehar Singh L-434 Shkur Pur.	S/K		28	11	3633-00 - 45-00 = 3588-00	
	Daily Total			510	G. Total	64876-00 - 810-00 = 64066-00	
	Initials of person marking the daily attendance					65898 - 810 = 65088	
	Initials of Inspecting Officer					66155 - 810 = 65345	

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.

Sanitation Officer Chief Sanitation Inspector

CNo 4

HEALTH DEPARTMENT

MUSTER ROLL NO. RMR S1K (From 1/3/07 To 31/3/07)

Circle No. 4 Voucher No. Dated

In continuation of Muster Roll No.

PART-NOMINAL-ROLL

Accountant (HG) 36964 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
11	Sh. Devrider S/o Raghubir H.N.131 Jwala Puri C.N. 4.	L/B	2 = Loory Duty	28	127.40 +66-00	3633-00-45-00=3588-00	36269 3651
12	Sh. Jai Bhagwan S/o Jee Ram 2-B/615 Naglai Delhi 4.	S/K		27	11	3506-00-45-00=3461-00	
13	Sh. Suresh S/o Ishwar. H.N. 9793 gali N.7 multan Dhanda Pahar ganj.	L/B	2 = Loory Duty	31	11	4015-00-45-00=3970-00	
1/37 (14)	Smt Rajjo w/o Ram Phal J-2/214 Madan Gir.		Absent		11		
1/38 (15)	Smt Laxmi w/o Ram Pal B-86 B-31 Tirlok Puri		Expire		11		
	Daily Total			314	G. Total	47227-00-585-00=46642-00	
	Initials of person marking the daily attendance			373 days		48121 585	47536
	Initials of Inspecting Officer					48378-585=	47793

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.

E No 4

HEALTH DEPARTMENT

MUSTER ROLL NO. RMR S/K (From 1/3/07 To 31/3/07)

Circle No. 4 Voucher No. Dated.

In continuation of Muster Roll No.

PART-NOMINAL-ROLL

Accountant (HG), 18166 CHIEF MEDICAL OFFICER

17941 / 1764 / 17541

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
(6)	Sh. Prem Singh S/o Singh Ram 22 Mander marg.	S/K	P P P P P P P P P P P P P P P P P P P P P P P P P P P P P P P	31 / 28	127-40 +66-00	4015-00 - 45-00 = 3970-00	
(7)	Smt. Sunita w/o Raj Kumar H.N. 12 Harijan Basti manda marg	d/o	P P P S/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	~~27~~ 8/30	11	~~3506-00~~ - 45-00 = 3633	~~3461-00~~ 3589
(8)	Smt. Laxmi w/o Gudhari E-1/51 New Ranji Nagar	d/o	P P P S/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	29 / 8/30	11	~~3761-00~~ - 45-00 = 3888	~~3716-00~~ 3843
(9)	Smt. Bimla w/o Ram Chandra C. 4 Palika Dham.	d/o	P P P S/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	29 / 8/30	11	~~3633-00~~ - 45-00 = 3761	~~3588-00~~ 3716
(10)	Sh. Shanker S/o Johari H.N. 15 Jagat mata Ashram Tilak Nagar.	d/o	P P P S/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	~~26~~ 8/30	11	~~3376-00~~ - 45-00 = 3506 - 45 = 3461	~~3331-00~~ 3461
	Daily Total			285			
	Initials of person marking the daily attendance			~~286~~ G. Total		~~36073-00~~ - ~~450-00~~ = ~~35623-00~~	
	Initials of Inspecting Officer					~~36712~~ . 450 = ~~36262~~ ~~36564~~ - 450 = ~~36514~~ 36964 - 450 = 36514	

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.

HEALTH DEPARTMENT

MUSTER ROLL NO. R.M.R. S/K (From 1/3/07 To 31/3/07)

Circle No. 4 Voucher No. Dated

In continuation of Muster Roll No.

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	Smt. Maya w/o Chhoty Lal 18/259 Bapa Dham.	S/K	P P P P P P P A P P P P P P P P P P P P P P P P P P P P P H P P P P P	28	127-40 +46-00	3633-00	3588-00
2	Sh. Mukesh S/o Hari Chand 35- Harijan Basti.	-do-	P P P S P P P P P P P P P A A P P P P P P P P P P P P P A P P L L L H L L L L L L L L L L L L L L L L L L L L L L L L L L L L L L L L = Leave Duty	27	11	3506-00 - 45-00 = 3461-00	
3	Sh. Rajan S/o Subey Singh A-3 Palika Dham.	-do-	P P P P P P P P P P A P P P P P P P P P P P P P P P P P A P P A H L L L L L L L L L L L L L L L L L L L L L L L L L L L L L L L L = Leave Duty	27	11	3506-00 - 45-00 = 3461-00	
4	Sh. Sajan S/o Rattan Singh Bapana Delhi.	-do-	P P P S P P P P P P A A P P P A A P P P P P P P P P P P P P P P P P P P