93	Govind	S/o	Harisingh	45
94	Harkesh	S/o	Motilal	45
95	Ramesh	S/o	Todal	45
96	Richpal	S/o	Chattarsingh	45
97	Ajeetkumar	S/o	Chamanlal	45
98	Subhash	S/o	Attarsingh	45
99	Arunkumar	S/o	Chanderpal	Nil
100	Kamalsingh	S/o	Shivlal	45
101	Karamchand	S/o	Ratiram	45
102	Anilkumar	S/o	Laxman	45
103	Umesh	S/o	Laxman	45
104	Ramcharan	S/o	Chhateylal	45
105	Saleti	S/o	Hosiyarsingh	45
106	Kamalkishor	S/o	Baluram	45
107	Sanju	S/o	Fakirchand	45
108	Mukesh	S/o	Jaichand	45
109	Ashwani	S/o	Ramsingh	45
110	Shudhirkumar	S/o	Omparkash	45
				4590/-

SI XIV

ASI

63	Suraj Parkash	S/o	Jailal	—	45
64	Sanjeev	S/o	Phoolsingh		Nil
65	Devender	S/o	Raj Pal	—	45
66	Rakesh	S/o	Khazansingh	—	45
67	Pawan Kumar	S/o	Mukhtyare	—	45
68	Babby	S/o	Jagat Ram	—	45
69	Krishan	S/o	Birma	—	45
70	Sanjay	S/o	Ramkishan	—	45
71	Mahesh	S/o	Biru	—	45
72	Raj Kumar	S/o	Girraj	—	45
73	Ramesh	S/o	Bisharsarup	—	45
74	Jugal	S/o	Ratnu	—	45
Nigh 75	Jaikishan	S/o	Itwari	—	45
76	Kishanlal	S/o	Piyare	—	Nil
77	Ajeet	S/o	Devi Ram	—	45
78	Anil Kumar	S/o	Om Parkash	—	45
79	Devdutt	S/o	Nathi	—	45
80	Suresh	S/o	Phoolsingh	—	45
81	Sarjeet	S/o	Berjlal	—	45
82	Anil	S/o	Shri Inderlal	—	45
83	Shanker	S/o	Nanakchand	—	45
84	Raj Kumar	S/o	Fakirchand	—	45
85	Partap	S/o	Budhi	—	45
86	Bhikhari	S/o	Bhorilal	—	45
87	Jai Parkash	S/o	Raja Ram	—	45
88	Raju	S/o	Surjan	—	45
89	Satpal	S/o	Shivcharan	—	45
90	Naresh	S/o	Babusingh	—	45
91	Mohd Salim	S/o	Abdulmaman	—	45
92	Dalip	S/o	Karansingh	—	45

31	Phool Singh	S/o	Shivdayal	NIL
32.	Vinod	S/o	Mali Ram	NIL
33	Kamal	S/o	Amilal	45
34.	Mukesh	S/o	Mai Ram	45
35	Smt Kamlesh	W/o	Karmvir	45
36	Sukhbeer	S/o	Sita Ram	45
37.	Raj Kumar	S/o	Satpal	45
38	Mahender	S/o	Bishan	NIL
39.	Suresh	S/o	Raghbeer	45
40	Ramkishan	S/o	Ram Parshad	45
41.	Babli	S/o	Sarvan	45
42.	Dayawati	W/o	Ratnu	45
43.	Soran	S/o	Chokeylal	45
44.	Shahupal	S/o	Shi Bhim Singh	45
45	Parveen	S/o	Umed Singh	45
46	Ravi	S/o	Suresh	45
47.	Sanjay	S/o	Nanka	45
48	Rajesh	S/o	Mangtu	45
49.	Mukesh	S/o	Maheslal	45
50	Bhalley	S/o	Khacheru	45
51.	Mamchand	S/o	Bhulhan	NIL
52.	Bhupender	S/o	Lal Singh	45
53.	Tej Pal	S/o	Sunmari	45
54	Rajender	S/o	Ramkishan	45
55	Raj Kumar	S/o	Amar Singh	45
56	Updesh	S/o	Peeter	45
57.	Om Parkash	S/o	Ram Niwash	45
58	Smt Kamlesh	W/o	Radhey	45
59	Vinod Kumar	S/o	Kitab Singh	45
~~60~~	~~Sudhir Kumar~~	~~S/o~~	~~Om Parkash~~	
E/V 60	Vinod Kumar	S/o	Chander Pal	45
62.	Gopal	S/o	Devi Ram	45
62	Kishanlal	S/o	Birkey	45

Recavery schedule of B/F the following
R.M.R. S.12. CN.14. for the resp. Health Depart.
for the month march 2007.

1.	Gurmej	S/o	Banarsi	45
2.	Sunil	S/o	Mohanlal	45
3.	Sunil	S/o	Brahamchand	45
4.	Jashwant	S/o	Ramsingh	45
5.	Kishan	S/o	Ram Avttar	45
6.	Siri Bagwan	S/o	Harcharan	45
7.	Smt Rajjo	W/o	Madanlal	45
8.	Raj Pal	S/o	Shaymchand	45
9.	Smt Indira	W/o	Siri Ram	45
10.	Smt Jashwanti	W/o	Premchand	45
11.	Smt Ramkali	W/o	Anant Ram	45
12.	Sunil	S/o	Om Parkash	45
13.	Suresh	S/o	Todal	45
14.	Ramesh	S/o	Ram Saroop	45
15.	Madan	S/o	Nanak Chand	45
16.	Smt Savitri	W/o	Chidda Ram	45
17.	Om Parkash	S/o	Attar Singh	45
18.	Smt Sharda	W/o	Surender	45
19.	Smt Maya	W/o	Daya Ram	45
20.	Rajesh	S/o	Bhaltey Ram	45
21.	Kamal Singh	S/o	Ram Singh	45
22.	Ram Parshad	S/o	Nathi	45
23.	Rajber	S/o	Shi Subey Singh	45
24.	Karan	S/o	Umed Singh	NIL
25.	Sunderlal	S/o	Banawrilal	45
T.M. 26.	Kaywati	W/o	Kalu Ram	45
27.	Om Parkash	S/o	Chunnilal	45
28.	Jagdish	S/o	Pappa Ram	45
29.	Smt Shanti	W/o	Bangali	45
30.	Jagannat	S/o	Premchand	45

HEALTH DEPARTMENT

22-

MUSTER ROLL NO. 5 (From 1-3-07 To 31-3-07.)

Circle No. XIV Voucher No. 47/4/5 Dated 1/4/07

In continuation of Muster Roll No. R-M-R S.K. Night. 14/4/07

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
105	Saleti S/o Hosiyar Singh	S.K. R.M.R.	P P	P P	P P	H	P P	P P	P P	P P	P P	P P	P P	P P	(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 P	P P	P P	P P	30 days	129-40 + CA	3888	45 = 3843
106	Kamal Kishor S/o Babu Ram	"	P P	P P	P P	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 P	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 days	"	4015	45 = 3976
108	Sanju S/o Faqirchand	"	P P	P P	P P	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 P	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 days	"	4015	45 = 3976
108	Mukesh S/o Jaichand	"	P P	P P	P P	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 P	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 days	"	4015	45 = 3976
109	Ashwani S/o Ram Singh		P P	P P	P P	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 P	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	"	3376	45 = 3331
110	Sudhir S/o Omparkash		P P	P P	P P	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 P	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	"	4015	45 = 3970
	Daily Total																																	2920	G. Total	382301	= 4590 = 377711
	Initials of person marking the daily attendance																																	2952		382557	4590 = 377967
	Initials of Inspecting Officer																																				

Pay Rs. 382557 (Rupees Three lacs Eighty two thousand five hundred Fifty Seven only)

Pay to staff Rs 377967
B/Fr. 4590
S.A. Rs. 382557

Accountant (HG) M.O.H. Sr. A.O. (F.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.

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

Voucher is fully paid

Rs. P.

ECR Entry on page 46 to 82 H.E(III)

Sanitation Officer

VERIFIED FOR CASH/CHEQUE PAYMENT

Head Cashier

APPROVED

S.P. TANEJA
Addl. Dy. Commr. (Health)
NDMC, Palika Kendra
New Delhi

HEALTH DEPARTMENT

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

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

In continuation of Muster Roll No. R.M.R-SK. Night.

Accountant (HG), CHIEF MEDICAL OFFICER

PART-NOMINAL-ROLL

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
101	Kamalsingh S/o Shivlal	SK R-M-R	D D	D D	D D	H	D D	D D	D D	D D	D D	D D	A	D D	D D	D D	D D	A	D D	D D	D D	D D	D D	D D	D D	D D	D D	D D	D D	D D	D D	D D	D D	29 day	12746 +CA	3761	= 45 = 3716
102	Karamchand S/o Ratiram	"	D D	D D	D D	D D	D D	D D	D D	D D	D D	D D	A A	D D	D D	D D	D D	A	D D	D D	A	D D	D D	D D	D D	D D	D D	D D	D D	D D	D D	D D	D D	27 day	"	3506	= 45 = 3461
103	Anil S/o Laxman	"	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 A	A A	A A	A A	A A	A A	D D	D D	D D	D D	A	D D	D D	A A	A A	A A	D D	07 day	"	909	= 45 = 864
104	Umesh S/o Laxman	"	D D	D D	D D	H	D D	D D	D D	D D	D D	D D	A	D D	D D	D D	D D	D D	D D	D D	D D	D D	D D	D D	D D	D D	D D	D D	D D	D D	D D	D D	D D	30 day	"	3888	= 45 = 3843
105	Ramcharan S/o Chotelal	"	D D	D D	D D	H	D D	D D	D D	D D	D D	D D	A A	D D	D D	D D	D D	D D	D D	D D	D D	D D	D D	D D	D D	D D	D D	D D	D D	D D	D D	D D	D D	29 day	"	3761	= 45 = 3716
		Daily Total																																2771	G. Total	358977 =	43202 = 354657
		Initials of person marking the daily attendance																																2772		359233 =	354913
		Initials of Inspecting Officer																																			

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

Grand Total of this Muster Roll ... ...

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.

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

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

HEALTH DEPARTMENT

20

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

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

In continuation of Muster Roll No. R.M.R. S.K. Night

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 ..... (1–31)	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
95	Ramesh S/o Todal 7/229 Trilokpuri Delhi	SK R.M.R.	D D D H D D D

19

HEALTH DEPARTMENT

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

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

In continuation of Muster Roll No. R.M.R. S.K. Night-

Accountant (HG), CHIEF MEDICAL OFFICER

PART-NOMINAL-ROLL

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 2396 2395	Rate Rs. P.	Amount Rs. P.	Sign. or thumb impression of payee and dated initials of paying officer made at the time of payment
90	Naresh S/o Babusingh	SK R.M.R.	D P	D P	D P	H	D P	D P	D P	D P	D P	D P	D P	D P	D P	D P	D P	D P	D P	D P	D P	D P	P	P P	P P	D P	D P	D P	D P	D P	D P	D P	D	31 days + CA	12740	4015	= 45 = 3976 306810 306554 Paid
91	Mohd Salim S/o Abdulmanan	"	D P	D P	D P	H	D P	D P	D P	D P	D P	D P	D P	D P	D P	D P	D P	D P	D P	D P	D P	D P	D P	D P	D P	D P	D P	D P	D P	D P	D P	D P	D	31 days	"	4015	= 45 = 3970
92	Dalip S/o Karansingh	"	D P	D P	D P	H	D P	D P	D P	D P	D P	D P	D P	D P	D P	D P	D P	D P	D P	D P	D P	D P	D P	D P	D P	D P	D P	D P	D P	D P	D P	D P	D	31 days	"	4015	= 45 = 3970
~~94~~ 93	Govind S/o Hari Singh 16/471 Trilokpuri Delhi	"	D P	D P	D P	H	D P	D P	D P	D P	D P	D P	D P	D P	D P	D P	D P	D P	D P	D P	D P	D P	D P	D P	D P	D P	D P	D P	D P	D P	D P	D P	D	29 days	"	3761	= 45 = 3716
~~95~~ 94	Harkesh S/o Motilal	"	D P	D P	D P	H	D P	D P	D P	D P	D P	D P	D P	D P	D P	D P	D P	D P	D P	D P	D P	D P	D P	D P	D P	D P	D P	D P	D P	D P	D P	D P	D	30 days	"	3888	= 45 = 3843
		Daily Total																																~~2547~~ 2548	G. Total	~~324938~~ 330194	= 3915 = ~~326023~~ 326279
		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.

HEALTH DEPARTMENT

18

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

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

In continuation of Muster Roll No. R.M.R-S.K- Night

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 ... (1–31)	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
~~86~~ 85	Partap S/o Budhi	S.K. R.M.R.	D D D H D D D

HEALTH DEPARTMENT

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

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

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

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 2098	Rate Rs. P.	Amount Rs. P.	Sign. or thumb impression of payee and dated initials of paying officer made at the time of payment
80	Suresh S/o Phoolsingh. 10 Behind DSED Qur	SR. R.M.R.	P	P	P	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	31 days	127-45 +CA	4015	= 45 = 3970 13225
81	Sarjeet S/o Brijlal	"	P	P	P	H	P	P	P	P	P	A	A	A	A	P	P	P	P	A	A	P	P	P	P	P	P	P	P	P	P	P	P	24 days	"	3116	= 45 = 3071
82	Anil S/o Shri Inderlal.	"	P	P	P	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	31 day	"	4015	= 45 = 3970 Anil
~~84~~ 83	Shanker S/o Nanek Chand.	"	P	P	P	H	P	P	P	P	P	P	A	A	P	P	P	P	P	A	P	P	P	P	P	P	P	P	P	P	P	P	P	28 days	"	3633	= 45 = 3588
~~85~~ 84	Raj Kumar S/o Faker Chand.	"	P	P	P	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	31 day	"	4015	= 45 = 3970
		Daily Total																																2242	G. Total 296433		= 3465 = 286958 287214
		Initials of person marking the daily attendance																																2243		290679	
		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.

HEALTH DEPARTMENT

16

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

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

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

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
75	Jai Kishan S/o Jhawari Jasol Vill- Rewa	Sk. R.M.R.	P	P	P	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	31 days	127.40 +CA-	4015	= 45 = 3970
76	Kishanlal S/o Piyare Vill- Thasil Hodal Faridabad H.R.	"	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	A	A	NIL	- " -		
77	Ajeet S/o Devi Ram S/o Trilok Singh Rewa	"	P	P	P	H	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	30 days	"	3888	= 45 = 3843
78	Anil S/o Om Parkash S/o Thogel Jeet Singh Rewa	"	P	P	P	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	31 days	"	4015	= 45 = 3970
79	Devdatt S/o Nathi Vill Khaitrel Faridabad H.R.	"	P	P	P	H	P	P	P	P	P	A	A	A	P	P	P	P	P	P	P	P	P	P	P	P	P	P	P	P	P	P	P	28 days	"	3633	= 45 = 3588
	Daily Total																																	2097	G. Total	271629	= 3240
	Initials of person marking the daily attendance																																	2098		271885	
	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.

HEALTH DEPARTMENT

15

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

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

In continuation of Muster Roll No. R.M.R. S.K. E/V

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
70	Sanjay S/o Ram Kishan G/aP. R.lane Del	S.K. R.M.R.	D D D H D D D

HEALTH DEPARTMENT

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

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

In continuation of Muster Roll No. R.M.R.S.K. E/V

Accountant (HG) CHIEF MEDICAL OFFICER

PART-NOMINAL-ROLL

S.No.	Name, Father's/Husband's Name & Address grouped acccrding to classes	Designation	Dates From ..... To ..... (1–31)	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
~~66~~ 65	Devender S/o Raj Pal. CHS Naubsarai	S.K R.M.R.	D D D H D D D

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HEALTH DEPARTMENT

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

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

In continuation of Muster Roll No. R.M.R. S.K. E/V

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
60	Vinod S/o Chander Pal. 16/1097 T. Nagar	S.K. R.M.R.	P P D 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 P P (LB)	31 days + CA	127.44	4015	= 45 = 3970
61	Gopal S/o Devi Ram. 7/463 Trilok Puri	"	A A P 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 P P	29 days	"	3761	= 45 = 3716
62	Kishanlal S/o Birkely. 45 South Ex DJB	"	P P A H A P P P A P A P P P P P P P P P A P P P P P A P P P P P P P	25 days	"	3246	= 45 = 3201
~~64~~ 63	Suraj Prakash S/o Jaidal. 102 Balmiki Sadan Mandir	"	P P P 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 P P 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 days	"	4015	= 45 = 3970
~~65~~ 64	Sanjeev S/o Phool Singh Kapen Gaziyabad	"	A A A

HEALTH DEPARTMENT

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

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

In continuation of Muster Roll No. R.M.R. S.K. T-mag

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 1446	Rate Rs. P.	Amount Rs. P.	Sign. or thumb impression of payee and dated initials of paying officer made at the time of payment
56	Updesh S/o Peeter. 16/114 Tilak Nagar Delhi	S.K.	P P P H P P P

HEALTH DEPARTMENT

MUSTER ROLL NO. ..... (From 1-8-07 To 31-8-07)

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

In continuation of Muster Roll No. R.M.R. S.K. T.marg

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 ... (1–31)	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
51	Mamchand S/o Bhuley Ram S.K.		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 A A	Nil	1274 + CA	—	
52.	Bhupender S/o Lal Singh, 1540 D.D.A. Colab Janta Flat G.T.B. Extd. Delhi	"	P P P 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	31	"	4015	= 45 = 3970
53.	Tej Pal S/o Summari, 143 Pali Kalhanwe Delhi	"	P P P 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	31	"	4015	= 45 = 3970
54.	Rajender S/o Ramkishan, A/86 Durga Enclave Delhi	"	P P P 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	31	"	4015	= 45 = 3970
55	Raj Kumar S/o Amar Singh, 10/57 Tilak Puri Delhi	"	P P P 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	31	"	4015	= 45 = 3970
	Daily Total			1445	G. Total	187132	= 2250 = 184882
	Initials of person marking the daily attendance			1446		187388	
	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		

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HEALTH DEPARTMENT

MUSTER ROLL NO. ..... (From 1-8-07 To 31-8-07)

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

In continuation of Muster Roll No. R.M.R. S.R.T. Mcerg

Accountant (HG), CHIEF MEDICAL OFFICER

PART-NOMINAL-ROLL

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
46.	Ravi S/o Suresh. S-43 Balmiki Basti N. Delhi-	S.R.	P P P 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	30	127-46 +CA.	3888	= 45 = 3843
47.	Sanjay. S/o Nanka. O-15 Welcome Seelampur III - Delhi-53	"	P P P 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	31	"	4015	= 45 = 3970
48.	Rajesh S/o Mangu. Jhuggi No-101 Pahilkadham N. Delhi	"	P P P 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	31	"	4015	= 45 = 3970
49.	Mukesh S/o Mahesh Lal. 1/26 Rast Pati Bhawan N. Delhi	"	P P P 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	31	"	4015	= 45 = 3970
50.	Bholley S/o Khechru. 1/282 Sundar Nagari Delhi	"	P P P 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	31	"	4015	= 45 = 3970
	Daily Total			1322	G. Total	171328	= 2070 = 169258
	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.

HEALTH DEPARTMENT

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

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

In continuation of Muster Roll No. R.M.R. S.K. T-marg

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
41	Babli S/o Sarvan B/82 Trilok Puri - Delhi	SK.	P P P H P A P

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. ..... (From 1-4-07 To 31-4-07)

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

In continuation of Muster Roll No. R.M.R S.K.T. marg

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 ... (1–31)	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
36	Sukhbeer S/o Sita Ram 753/C Lakhmi Gandi Gaziabad - U.P	S.K.	P P P H P P P

HEALTH DEPARTMENT

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

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

In continuation of Muster Roll No. R-M-R S.K.-T-Marg

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.	Phoolsingh S/o Shivdayal 117 Naya Tahirpur Shadra Delhi 96	S.K.	Ex Pire d.		117-00 +CA		
32	Vinod S/o Mali Ram T/15 Shakoor Pur Basti Delhi 96	"	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 A A	-NIL			
33.	Kamal S/o Amilal C.P.O 148 Madangiri Delhi-62	"	P P P 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	31 days	"	4015	= 45 = 3970
34.	Mukesh S/o Mai Ram H.496 Bawana - Delhi	"	P P P 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	30 days	"	3888	= 45 = 3843
35	Smt. Ramlesh W/o Karmvir H.No 1251 - Jhagir Puri Delhi	"	P P P H P P P A P P P A A P P P P P P P P P P P P P P P P P P	28 days	"	3633	= 45 = 3588
	Daily Total			902	G. Total	116915	= 1440 = 115475
	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.

HEALTH DEPARTMENT

MUSTER ROLL NO. ..... (From 1-8-07 To 31-8-07)

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

In continuation of Muster Roll No. R.M.R. S.K. T. Marg.

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 ..... (1–31)	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	Smt. Rajwati W/o Kalu Ram S.K. H.No 20 Willegden. Greva		P P P H P P P

HEALTH DEPARTMENT

(5)

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

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

In continuation of Muster Roll No. R.M.R. S.K. C.P.

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	Komal Singh S/o Ram Singh T.563/2 B&G Gali No 3 Bulchet Nagar Delhi	SK R.M.R.	P/WB	P/WB	P/WB	H	P/WB	P/WB	P/WB	P/WB	P/WB	P/WB	P/WB	P/WB	P/WB	P/WB	P/WB	P/WB	P/WB	P/WB	P/WB	P/WB	P/WB	P/WB	P/WB	P/WB	P/WB	P/WB	P/WB	P/WB	P/WB	P/WB	P/WB	31 days	129.40 +CA	4015	= 45 = 3970
22	Ram Prasad S/o Sh Nathi Milhad colony Faridabad	"	P/WB	P/WB	P/WB	P/WB	P/WB	P/WB	P/WB	P/WB	P/WB	P/WB	P/WB	P/WB	P/WB	P/WB	P/WB	P/WB	P/WB	P/WB	P/WB	P/WB	P/WB	P/WB	P/WB	P/WB	P/WB	P/WB	P/WB	P/WB	P/WB	P/WB	P/WB	31 days	"	4015	= 45 = 3970
23	Rajbir S/o Sh Satbey Singh 16/469 Trilok Puri Delhi	"	P	P	P	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	31 days	"	4015	— 45 = 3970
24	Karan S/o Sh Umed Singh	"																																Will.			Terminated.
25	Sunderlal S/o Banwari Lal 296/Holambi Kalan	" "	P	P	P	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	A	P	30	"	3888	= 45 = 3843
	Daily Total																																	662	G. Total	85812	= 1080 = 84732
	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		

HEALTH DEPARTMENT

(4)

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

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

In continuation of Muster Roll No. R.M.R. S.K. C.P.

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	Savitri w/o Om Chhidola. B/416 J.J. Camp Lepra Delhi	S.K. R.M.R.	A	P	A	H	P	P	P	P	P	P	A	A	A	A	A	P	P	P	P	P	P	P	P	P	P	A	P	P	A	P	P	22 days	127.40 +CA	2856	= 45 = 2811
17 Sh	Om Prakash S/o Om Prakash G-176 Old Seema Puri Delhi	"	P/B	P/B	P/B	H	P/B	P/B	P/B	P/B	P/B	P/B	A	P/B	P/B	P/B	P/B	P/B	P/B	P/B	P/B	P/B	P/B	P/B	P/B	P/B	P/B	P/B	P/B	P/B	P/B	P/B	P/B	30 days	"	3888	= 45 = 3843
18 Smt	Sharda w/o Surinder 1068 Nawi Karim Delhi	"	P	P	P	H	P	P	P	P	A	P	P	P	A	P	P	P	P	P	A	P	P	P	P	A	P	P	P	P	P	P	P	27 days	"	3506	= 45 = 3461
19 Smt	Maya w/o Sh Daya Ram. 7/420 Dakshin Puri Delhi	"	P	P	P	H	P	P	P	P	P	P	P	A	P	P	P	P	P	P	P	P	P	P	P	P	P	P	P	P	A	P	P	29 days	"	3761	= 45 = 3716
20 Sh	Rajesh s/o Sh Bhulley Ram G zero old Seema Puri Delhi	"	P	P	P	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	31 days	"	4015	= 45 = 3970
		Daily Total																																539	G. Total	69879	= 900 = 68979.-
		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		

(3)

HEALTH DEPARTMENT

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

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

In continuation of Muster Roll No. R.M.R. S.K. C.P.

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
11	Smt Ramkali W/o Anant Ram B/1930 Madangir RWA	S.K. R.M.R.	P	P	P	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	31 days	1246 +CA	4015	= 45 = 3970
12	Sh. Sunil S/o Ombrakash H.2 Bohagal Serve Delh	11	P	P	P	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	31 days	11	4015	= 45 = 3970
13	Sh. Suresh S/o Todal 7/279 Trilokpuri Delh	11	P	P	P	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	31 days	11	4015	= 45 = 3970
14	Sh. Ramesh S/o Ram Sarup 38/80 M.A. M.C. Camp Delh	11	P	P	P	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	31 days	11	4015	= 45 = 3970
15	Sh. Madan S/o Nanak 35/361 Trilokpuri Delh	11	P	A	A	H	P	P	P	P	A	P	P	A	P	P	P	P	P	P	A	P	P	P	P	P	P	P	P	P	P	P	P	26 days	11	3376	= 45 = 3331
	Daily Total																																	400	G. Total	51853	= 675 = 51178
	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.

HEALTH DEPARTMENT

MUSTER ROLL NO. ..... (From 1-3-2007 To 31-3-07)

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

In continuation of Muster Roll No. R.M.R. 3K. C.P.

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
6. Sh. P-47	Shri Bhagwan S/o Sh Harcharan. C-2448 Colony Shahdara Delhi	3K RMR	P P P	P P P	P P P	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 P	P P P	P P P	P P P	P P P	P P P	P P P	P P P	P P P	P P P	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 days	127.40 +CA	4015	= 45 = 3970
7. Smt.	Rajjo W/o Madan Lal 1075 6 Tilak Nagar Delhi	—	P P P	P P P	P P P	H	P P P	P P P	A	P P P	P P P	P P P	P P P	P P P	A	P P P	A	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 P P	A	P P P	P P P	P P P	P P P	P P P	26 days	"	3376	= 45 = 3331
8. Sh.	Raj Pal S/o Shyam Chand A-93 D.D.A. Colony Delhi	—	A	P P P	P P P	H	P P P	P P P	P P P	A	A	A	A	P P P	A	P P P	P P P	A	P P P	P P P	P P P	A	P P P	A	P P P	P P P	P P P	P P P	P P P	P P P	A	P P P	A	20 days	"	2597	= 45 = 2552
9. Smt	Indira W/o Sri Ram 1392 Local Shahdara Delhi	—	A	A	P P P	H	P P P	P P P	P P P	A	A	A	A	A	A	A	P P P	P P P	P P P	A	A	A	A	A	A	A	S	P P P	A	A	A	A	P P P	10 days	"	1298	= 45 = 1253
10. Smt	Jagwanti W/o Premchand 357 Sunlight Colony Delhi		P P P	P P P	P P P	H	P P P	P P P	P P P	P P P	P P P	P P P	A	P P P	A	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 P P	P P P	P P P	P P P	P P P	P P P	P P P	P P P	P P P	28 days	"	3639	= 45 = 3588
	Daily Total																																	250	G. Total	32417	= 450 = 31967
	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.

HEALTH DEPARTMENT

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

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

In continuation of Muster Roll No. R.M.R. S.R. C.P.

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
1. Sh.	Gyan Chand S/o Banshi Lal 601 T. Lajpat Nagar Hospital New Delhi	S.R. R.M.R.	P P P H P P P