No. No. 20/481/C.M.O. (HG), dt 31-1-07

HEALTH DEPARTMENT

MUSTER ROLL NO. 3527 (From 1-4-07 To ~~30-4-07~~ 22-4-07)

(19) Daily wager S.K.S/L.D.S Contr. Sheet No. 3.

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

In continuation of Muster Roll No. 3484

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
11	Smt Anita w/o Subhash	Jmr		18 days	do	2341-00	
12	Smt Munni w/o Dharampal	do		17 days	do	2211-00	
13	Smt Kamlesh w/o Ajeet	do		16 days	do	2081-00	
14	Smt Urmila w/o Dinesh	do		18 days	do	2341-00	
15	Smt Roopa w/o Vicky. Addr- H.No 550 Ram Nagar colony - Baba Made Faridabad	do		18 days	do	2341-00	
	Daily Total		5 14 15 12 14 14 14 5 12 13 15 14 15 14 5 15 14 13 11 11 11 5	241 days	Total	31344-00	
	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.

Sanitation Officer Chief Sanitation Inspector

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.

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

HEALTH DEPARTMENT

MUSTER ROLL NO. 3527 (From 1-4-07 To ~~30-4-07~~ 22-4-07)

(19) Daily wages 5 Ks / 1 Bs
Only four sheets (1+3=4)

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

In continuation of Muster Roll No. 3484

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
6	Sh. Vicky S/o Chemdev	JMR	S	P	P	P	P	P	P	S	P	P	P	P	P	P	S	P	P	P	P	P	P	S										18 days	do	2341-00	Sig attested
7	Sh. Amit S/o Jai Karam	do	S	P	P	P	P	P	P	S	P	P	P	P	P	P	S	P	P	P	P	P	P	S										18 days	do	2341-00	Sig attested
8	Sh. Naveen S/o Ramwarchand	do	S	P	P	P	P	P	P	S	P	P	P	P	P	P	S	P	P	A	A	A	A	S										14 days	do	1821-00	Sig attested
9	Sh. Sarvesh S/o Dayaa Nand	do	S	P	P	A	A	A	A	S	A	A	P	P	P	P	S	P	P	A	A	A	A	S										5 days	do	650-00	Sig attested
10	Sh. Rajender S/o Rattanlal	do	S	P	P	P	P	P	P	S	P	P	P	P	P	P	S	P	P	P	P	P	P	S										18 days	do	2341-00	Sig attested
			Daily Total	S	9	10	7	9	9	9	5	7	8	10	9	10	9	S	10	9	8	7	7	7	S									154 days	Total	20029-00	
			Initials of person marking the daily attendance	S							S							S							S													
			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. 20/921/C.M.O.(HQ), dt. 8-1-07

HEALTH DEPARTMENT

MUSTER ROLL NO. 3527 (From 1-4-07 To ~~30-4-07~~ 22-4-07)

(19) Sanjay Nagar S.K.V/L.B.O
Cont. sheet No. 2

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

In continuation of Muster Roll No. 3484

Accountant (HG) CHIEF MEDICAL OFFICER

PART-NOMINAL-ROLL

S.No.	Name, Father's/Husband's Name & Address grouped accc rding 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. Satish S/o Kuldeep	JMR	S	P	P	P	P	P	P	S	P	P	P	P	P	P	S	P	P	P	P	P	P	S										18 days	27.40	2341-00	Sig attested
2	Sh. Mukesh S/o Khushi Ram	do	S	P	P	A	P	P	P	S	A	A	P	P	P	P	S	P	P	P	A	P	P	S										14 days	do	1821-00	Sig attested
3	Sh. Sanjay S/o Ramkaran		S	P	P	P	P	P	P	S	P	P	P	P	P	P	S	P	P	P	P	P	P	S										18 days	do	2341-00	Sig attested
4	Sh. Sanjay S/o Ramdhir Singh		S	P	A	P	P	P	S	A	P	P	P	P	P	P	S	P	A	P	P	A	A	S										13 days	do	1691-00	Sig attested
5	Sh. Sonu S/o Jagdish		S	P	P	P	P	P	P	S	P	P	P	P	P	P	S	P	P	P	P	P	P	S										18 days	do	2341-00	Sig attested
	Daily Total		5	5	5	3	5	5	5	3	4	5	5	5	5	5	5	4	5	4	4	4	4	5										81 days	G. Total	10535-00	
	Initials of person marking the daily attendance		S							S							S							S													
	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. D/931/C.M.O.(HQ), dt. 8.1.07

HEALTH DEPARTMENT

MUSTER ROLL NO. 3527 (From 1-4-07 To ~~30-4-07~~ 22-4-07)

(19) Sailyuwages S.K.S/L.B.S Contd. sheet No. 4.

Circle No. XIII Voucher No. 40/H Dated 7/5/07

In continuation of Muster Roll No. 3484

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
16	Smt Ratchi w/o Rakesh Adr. 518 Ram Nagar Colony. Batra Mach. Faridabad.	Tmk	S 1 1 1 1 1 1 S 1 1 1 1 1 1 S 1 1 1 1 1 1 S	18 days	do -	2341-00	Ratchi Signatured
17	Smt Usha w/o Rajkr. Add-14/79 Darshan Pkn N. Delhi-62	do.	S 1 1 1 1 1 1 S 1 1 1 1 1 1 S 1 1 1 1 1 1 S	18 days	do -	2341-00	Usha Signatured
18	Sh. Umesh S/o Jai Karan Adr. S-486 Mangal Puri N. Delhi-83	do.	S 1 1 1 1 1 1 S 1 1 1 1 1 1 S 1 1 1 1 1 1 S	18 days	do -	2341-00	Signatured
19	Smt Nirmala w/o Satish Adr. J.II/6 Madan gir N. Delhi-62	do	S 1 1 1 1 1 1 S 1 1 1 1 1 1 S 1 1 1 1 1 1 S	18 days	do -	2341-00	Nirmala Signatured
	Pay to Staff Rs 40708- B/F Rs Nil	Daily Total	S 18 19 16 18 18 18 S 16 17 19 18 19 18 S 19 18 17 18 18 18 S	313 days	Total	40708-00	
	SAR Rs 40708-	Initials of person marking the daily attendance					
		Initials of Inspecting Officer					

Pay Rs. 40708- (Rupees Forty thousand seven hundred only)

(forty thousand seven hundred eight only)

Serial No 13019 Rs 40708 fully Bill & all Sig. attested

Accountant (HG) (M. C. MISHRA) M.O.H. Sr. A.O. S. P. TANEJA AO (Public Health) N.D.M.C. Palika Kendra New Delhi

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 ... ... Rs. P.

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

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

Head Cashier

Received on 8/5/07 at 12.05 PM

Entry in page no 96 Serial No 101-01-3/5/07

SO(HC) 3/5/07 12.35 PM