Approval No. 1701/PS/Chairperson, dt. 16.4.07

HEALTH DEPARTMENT

MUSTER ROLL NO. 3570 (From 25-4-07 To 30-4-07) (24) Dailywagers Cont. sheet No. 3.

Circle No. VI Voucher No. 180/H Dated 29/5/07

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 according to classes	Designation	Dates From ... To ... 1–24	25	26	27	28	29	30	31	Total (23 days)	Rate Rs.	Rate P.	Amount Rs. (4940)	Amount P.	Sign. or thumb impression of payee and dated initials of paying officer made at the time of payment
1/20	Sh. Manish Kr. S/o Sunil, G-9 Ali Ganj, N. Delhi	D/W SK	→	P P P	P P P	P P P	P P P	[illegible]	P P P		5 days			650-00		Rcd. Manish Kr. Sy. [illegible]
2/21	Sh. Jaiwati w/o Trilok, 14/99 Gautam Puri Mohd. Band, Baderpur, Delhi	do	→	P P P	P P P	P P P	P P P	S P	P P P		5 days			650-00		Rcd.
3/22	Sh. Rahul S/o Vinod Kr., Qr. No. 294, Gali No. 17, Ajit Nagar, Gandhi Nagar	do	→	[illegible]	P P P	[illegible]	P P	[illegible]	P P P		3 days			390-00		Rcd. जयवती [illegible] Sig. Attested
4/23	Sh. Vinay Batra S/o Krishna, Mehar Chand Mkt, Lodhi Colony, N. Delhi	do	→	P P P	P P P	P P P	P P P	S P	P P P		5 days			650-00		Rcd. [illegible] Sy. [illegible]
5/24	Sh. Sunny S/o Hira Lal, H.No. 5-9, Of. Story, Ali Ganj, N. Delhi	do	→	P P P	P P P	P P P	P P P	S	[illegible]		04 days			520-00		Rcd. [illegible]
	Pay to Staff Rs. 12350/-													12350-/		
	B/F Rs. NIL — Daily Total		→								95		G. Total	12610-00		
	SAME 12350 — Initials of person marking the daily attendance		→	[illegible]	[illegible]	[illegible]	[illegible]	[illegible]	[illegible]		95					
	Initials of Inspecting Officer		→	[illegible]					[illegible]							

Posted 24/5/07, Enter Page No-99, S.No 164 (HG) 24/5/07 SO [illegible]

Pay Rs. 12350/- (Rupees Rs Twelve thousand three hundred fifty only)

Accountant (HG) (M C MISHRA) AAO (Public Health)

M.O.H.

Sr. A.O. (PH) [illegible] 28/5/07

S.N. TANEJA AO (Public Health) N.D.M.C. Palika Kendra New Delhi

CANCELLED Released for Payment

FOR CASH/CHEQUE PAYMENT Head Cashier

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 ...

All S.No 1 to 24 in bill No 180/H dt. 29/5/07 except S.No 6/16 & 3/22 of Sh. Arun S/o Sh. Bhuley & Sh. Rahul S/o Sh. Vinod Kumar

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

	Rs.	P.
Total Salary received	Rs 12350-00	
Paid	Rs 11830-00	
Balance	Rs 00520-00 only	

Total amount paid (in words) Rupees............ Balance Paid ... of Sh. Rahul

Approval No. 1701/PO/Chairperson, dt- 16.4.07

HEALTH DEPARTMENT

MUSTER ROLL NO. 3570 (From 25-4-07 To 30-4-07)

(24) Dailywager S.Ka/L.Ba Cont. Sheet No. 4.

Circle No. VI 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 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
6/16	Sh. Arun S/o Bhulley H.No. 250, Sunlight colony N.Delhi	D/W Sk																									A	A	A	P P P	A	A		1-day		130-00	31/7-07
6/17	Sh. Rajesh Kr. S/o Amrnath H.No. 61, Raj Pera Village Gaur Mandir Delhi 7	D/																									P P P	P P P	P P P	P P P	A	P P P		5 days		650-00	31/7-07
8/18	Sh. Vikky S/o Ramkishan H.No. 15 Ali Ganj D/Story, N. Delhi	D/																									A	A	A	A	A	A		NIL		NIL	
9/19	Sh. Vijay Kr. Puran Singh R2, Pehla Dhan Gali No. 1 N2																										P P P	P P P	P P P	P P P	A	P P P		5 days		650-00	31/7-07
	Daily Total																																	73 days	G. Total	9750-00	
	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.

Approval No. 1701/PS/Chairperson, dt. 16-4-07

HEALTH DEPARTMENT

(24) Dailywages S.Ks/L.Bs
Contd. Sheet No. 3.

MUSTER ROLL NO. 3570 (From 25-4-07 To 30-4-07)

Circle No. VI Voucher No. .... Dated ....

In continuation of Muster Roll No. Fresh

Accountant (HG), CHIEF MEDICAL OFFICER

PART-NOMINAL-ROLL

Dates From........ To........

S.No.	Name, Father's/Husband's Name & Address grouped according to classes	Designation	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 days	Rate Rs.	Rate P.	Amount Rs. (5720-0)	Amount P.	Sign. or thumb impression of payee and dated initials of paying officer made at the time of payment
1/11	Sh. Rajesh S/o Jagdish, C RN. 94, 80 yards Plot, Harijan Basti, Sultanpur	D/Lo S/L Lorry Beldar																									P	P	P	P	S	P		5 days			650-0		[signature]
2/12	Sh. Arbind Kr. S/o Bal Ram, D-464, Kidwai Nagar East, N. Delhi	-do-																									P	P	P	P	S	P		5 days			650-0		[signature]
3/13	Sh. Surender Kr. S/o Azad Singh, Qr No. 1113, Sector I, R K Puram, N. Delhi	-do-																									P	P	P	P	S	P		5 days			650-0		[signature]
4/14	Sh. Vinod Kr. S/o Sh. Chander Pal, DII/190, Madam Cross, N. Delhi	-do-																									A	A	A	A	A	A		NIL			NIL		
5/15	Rajesh S/o Om Prakash, A 1754, Jahangir Puri, Delhi	-do-																									P	P	P	P	S	P		5 days			650-0		[signature]
	Daily Total																																	6 20 days	G. Total		8320-0 5460		
	Initials of person marking the daily attendance																										[initials]	[initials]	[initials]	[initials]	[initials]	[initials]							
	Initials of Inspecting Officer																										[initials]					[initials]							

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

Approval No. 1701/PS/Chairperson, dt. 16.4.07

HEALTH DEPARTMENT

MUSTER ROLL NO. 3570 (From 25-4-07 To 30-4-07)

(24) Dailywager S.Kd/L.Rs Cont. sheet No. 2.

Circle No. VI 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 according to classes	Designation	Dates From ... To ... (1–24)	25–31	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.	Smt. Mamta W/o Sunil H. No 5, Jangpura, Road Delhi	D/W S/C	→	P P P P P	5 days		650-00	ममता
7.	Smt. Dayawati W/o Subhash H. No 40 Balmiki Basti Mandir Marg N.D.	do	→	A A P P P P	3 days		650-00 / 390	[thumb impression]
8.	Smt. Lokesh W/o Ravinder H. No 619, Sunlight Colony No 1 Ashram. N. Delhi	do	→	A A A A A A	MC		MC	
9.	Sh. Gautam S/o Rupender C-51, Baleka Kunj Lodhi Road, N. Delhi	do	→	P P P P A	4 days		520-00	[signature]
10.	Smt. Lalita W/o Mukesh 51, Balmiki Basti M. Marg. N. Delhi	do	→	P P P P P	5 days		650-00	Lalita
	Daily Total				42 days	G. Total	~~5720-00~~ 5460	
	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 ... ...

Rs.	P.

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

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

Approval No. 1701/PS/Chairperson, dt. 16.4.07

HEALTH DEPARTMENT

MUSTER ROLL NO. 3570 (From 25-4-07 To 30-4-07)

(24) Daily wages S.Ko/L.Ko
Only Five sheets (1+4=5)

Circle No. VI 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 acccrding to classes	Designation	Dates From ... To ... (1–31)	Total	Rate Rs. P.	Amount Rs.	Sign. or thumb impression of payee and dated initials of paying officer made at the time of payment
1.	Sh. Deepak S/o Rodham Singh Qr No. G-28, Ali Ganj New Delhi	D/W S/C Lorry Belt	P P P P G 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.