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

HEALTH DEPARTMENT

MUSTER ROLL NO. 3871 (From 25-4-07 To 30-4-07)

Circle No. 51 Voucher No. 136/A Dated 22/5/07

In continuation of Muster Roll No. Fresh

(51) Dailywager S.Ks/L... Contr. Ward No. 10.

PART-NOMINAL-ROLL

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
48	Smt. Dimple w/o Satish R/o H.No. T. Qandhi Kaushenr Colony Delhi	D/W	S S S S S S S	7	127.40 + CR	654.00	48 Sign Allen
49	Sh. Amit Raj S/o Rajkumar R/o E-45 Gali No. 10 Pahargunj	do	S S S S S S	5	do	650.00	49 Sign Allen
50	Smt. Lakshmi W/o Sh. Vinod R/o 245/246 Kalyanpuri	do	S S S S S	5	do	650.00	50 Sign Allen
51	Smt. Neeraj Kaur S/o Sh. Kehar Singh R/o T-9 DDA flats Tilak Nagar New Delhi	do	S S S S S	5	do	650.00	51 Sign Allen
	Pay to Staff 32370.00 B/F Rs. Nil	Daily Total		249	G. Total	32,370.00	
	G Rs. 32370.00	Initials of person marking the daily attendance					
		Initials of Inspecting Officer					

Pay Rs. 32370.00 (Rupees Rs. Thirty two thousand three hundred seventy only)

Accountant (HG) (M.C. MISHRA) AAO (Public Health) N.D.M.C. Palika Kendra

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.

CANCELLED Sr. A.O (PH) Re-Audit Payment AO (Public Health) N.D.M.C. Palika Kendra New Delhi

VERIFIED FOR CASH PAYMENT Head Cashier 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 Roll at Sh. Jitender S/o Nate Singh D/W S/No C Item No. 38 Rs. 650/- deposited at mpl. Treasury vide CR No. 113 dt 28/5/07. CR posted at S.No. 38 original. S.No. 1 to 51 Signature/(JT) 28/5/07 RT Attested except S.No. 38

Rs.	P.

Sanitation Officer

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

HEALTH DEPARTMENT

MUSTER ROLL NO. 3571 (From 25-4-07 To 30-4-07) (51) Daily wager S.Ks/L.As Const. Shed No. 9.

Circle No. VII 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 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
44	Sh Hans Raj S/Sh Chandan Singh R/o 2013 Block E Jahangir Puri	DW																																5	R740 + CA	658-00	(44) Bharat Sim
45	Sh Manoj Kumar S/Sh Jagdish R/o 41/146 Lodhi Garden	do																																5	do	658-00	(45) MKumar Sim
46	Sh Vikash S/Sh Vinod R/o R-148 East Sagar Pur	do																																5	do	658-00	(46) Vikas Sim
47	Smt Beena W/o Sh Suresh R/o Gali No. 18 Balmiki Basti Mandir Marg New Delhi	do																																5	do	658-00	(47) Bina Sim
	Daily Total																																	229	G. Total	29,770-00	
	Initials of person marking the daily attendance																																				
	Initials of Inspecting Officer																																				

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

	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		

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.

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

HEALTH DEPARTMENT

MUSTER ROLL NO. 3571 (From 25-4-07 To 30-4-07)

(51) Daily wager S.K.S/L.B
Cont. sheet No. 8.

Circle No. VII 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 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
40	Sh Vinod S/o Ram Phal R/o 15/273 Lady Hardy	D/W SK	S S S S S	5	130 + CA	650.00	Vinod (40)
41	Sh Vikas S/o Mahesh Kumar R/o Gandhi Sadan P.K. Road	do	S S S S S	5	do	650.00	Vikas (41)
42	Sh. Arun Kumar S/o Om Prakash R/o 39/4 Nomenclature Purdana Rd	do	S S S S S	3	do	390.00	372-07 = (42)
43	Smt Meena w/o Sh Vinod Kumar R/o Bapu Dham. N Delhi	do	S S S S S	5	do	650.00	(43)
	Daily Total			209	G. Total	27,170-00	
	Initials of person marking the daily attendance						
	Initials of Inspecting Officer		65				

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		

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

HEALTH DEPARTMENT

MUSTER ROLL NO. 3571 (From 25.4.07 To 30.4.07)

(51) Dailywager S.K.S/L.Dr Cond. Sheet No. 7.

Circle No. VII 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 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
36	Sh Bareen S/o Veerchand R/o D-117/152 Madanpur	DIW SK	24 24 24 24 S	17	127.4 + CA	658.00	Paid प्रवीन (36)
37	Smt Bhoorkali W/o Harikishan R/o Balmiki Sadan Mandir Marg	do	24 24 24 24 S	5	do	658.00	Paid (37)
38	Sh Jitender S/o Hukm Singh R/o Home Staff Quarter Lady Harding Hospital	do	24 24 24 24 S	5	do	658.00	Balance (N.T.P) Payment may not be released. (38) Balance CR No. 1/5 Deposite by dated 28/5/07
39	Sh Ravikumar S/o Rakesh R/o Aligarh Nawali	do	24 24 24 24 S	5	do	658.00	Ravi (39)
	Daily Total		38 38 38 38 S	39	G. Total	24,830-00	
	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

(6)

HEALTH DEPARTMENT

MUSTER ROLL NO. 3571 (From 25.4.07 To 30-4-07)

(51) Vaibhav S.K.S/L.B.S Const. Ward No. 6.

Circle No. VII 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 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	Sh. Ajay S/o Sh. Jagdish. R/o Aligunj Lodhi Road	Dkd		5	12740 + CA	650.00	Ajay (31)
32	Sh. Pawan Kumar S/o Sh. Jagendar Singh R/o 1120 Sector C Partap Nagar	do		5	do	650.00	Pawan (32)
33	Sh. Bem Singh S/o Sh. Moharsingh R/o C-577 Abedkar Vihar	do		5	do	650.00	Pramsingh (33)
34	Sh. Badrik S/o Sh. Bem Singh R/o 570 Balmiki Bagichi	do		5	do	650.00	(34)
35	Sh. Vikram S/o Sh. Rohtash Kumar R/o Aligunj Lodhi Road	do		5	do	650.00	(35)
			Daily Total	171	G. Total	22,230.00	
			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 ... ... Rs. P.

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

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

HEALTH DEPARTMENT

MUSTER ROLL NO. 3571 (From 25-4-07 To 30-4-07)

(51) Dailywager S.to/L.Rs Cont. Head No. 55.

Circle No. VII 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 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
25	Sh Naveen Kumar S/o Sh Vinod R/o 58 Madhu Marg	DFW SK		5	127.40 + CA	650	Paid (25)
26	Sh Brijesh S/o Sh Thanbir Singh R/o Indraloke Lady Land	do		5	do	650	Paid (26)
27	Sh Ashok Kumar S/o Sh Yokman Singh R/o 20A Tri Sahidi Ddm Fm	do		5	do	650.00	Paid Ashok Kumar (27)
28	Sh Sanjay Kumar S/o Sh Bhiraar R/o 10/21 Tribek Pen.	do		5	do	650	Paid Sanjay (28)
29	Sh Mukesh S/o Sh Asha Ram R/o 628 Madli Pur	do		5	do	650	Paid (29)
30	Sh Dharmender Kumar S/o Sh Khibarchand R/o A 2 Shastri Park Delhi	do		5	do	650	do (30)
	Daily Total			146	G. Total	18,980	
	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		

Approval No. 1401/PS/Chairperson, dt. 16.4.07

(4)

HEALTH DEPARTMENT

MUSTER ROLL NO. 3571 (From 25-4-07 To 30-4-07)

(51) Dailywager S.Ka/L.Be Cond. Sheed No. 4.

Circle No. VII 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 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
19	Sh. Satish Kumar S/o Sh. Bhagwan Das R/o 234 Gali Khyala Tuig Shiv Vihar Bijwasan	D/W	25 26 27 28 29 30 31	1	12740 + CA	130-00	Paid 2nd after (19)
20	Sh. Rajiv Kumar S/o Sh. Ravinder R/o G-8 Ward No. 2 Mehrauli	do	25 26 27 28 29 30 31	do	do	650-00	Paid 21/5/07 (20)
21	Sh. Anil Kumar S/o Sh. Om Prakash R/o Gali No. 19 Brahm Puri	do	25 26 27 28 29 30 31	do	do	650-00	Paid (21)
22	Sh. Sachin Kumar S/o Sh. Ji. Billu R/o 196 Gulabi Bagh	do	25 26 27 28 29 30 31	do	do	650-00	Paid (22)
23	Sh. Manoj Kumar S/o Sh. Arjan Singh R/o 298/96 Meer Dard Road Delhi	do	25 26 27 28 29 30 31	do	do	650-00	Paid 7/5/07 (23)
24	Sh. Nitin S/o Sh. Ashok Kumar R/o 55 East Rajouri Nagar	do	25 26 27 28 29 30 31	do	do	650-00	Paid (24)
	Daily Total		25 26 27 28 29 30 31	116	G. Total	15,080-00	
	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		

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

HEALTH DEPARTMENT

MUSTER ROLL NO. 3571 (From 25-4-07 To 30-4-07)

(51) Daily wager S.Ks/L.Bs
Cont. sheet No. 3-

Circle No. VII 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 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
14	Sh Rajiv S/o Sh Nafe Singh R/o staff quarter Lady Harding	D/W SK		65	127.40 + CA	650	Paid Rajiv (14)
15	Sh Vikas S/o Sh Nafe Singh R/o staff quarter Lady Harding	do		65	do	650	Paid Vikas (15)
16	Smt Poonam W/o Sh Ghanshyam R/o W2 41 Jahid Purbalia Delhi N.P.	do		65	do	650	Paid Poonam (16)
17	Sh Rakesh S/o Sh Hargan Lal R/o 5-19 P.R. Lane	do		65	do	650	Paid Rakesh (17)
18	Sh Raghi Nandan S/o Sh Karam Singh R/o Mandawali Delhi	do		65	do	650	Paid Raghi (18)
	Daily Total		18 18 18 18 18 18	90	G. Total	11,700-00	
	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		

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

HEALTH DEPARTMENT

MUSTER ROLL NO. 3571 (From 25-4-07 To 30-4-07)

(51) Daily wager S.K.S/G.R.C Cont. Award No. 2.

Circle No. VII 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 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
8	Sh. Anil Kumar S/o Sh. Hukam Chand R/o 23/304 Tri Nagar Delhi	D/W SK	S S S S S S S	5	130+CA	650/-	(8)
9	Sh. Sushil Kumar S/o Sh. Hukam Chand R/o 23/304 Tri Nagar Delhi	do	S S S S S S S	5	do	650/-	(9)
10	Sh. Laxman Prashad S/o Sh. Mohan Lal R/o M-80 Seelampur Delhi	do	S S S S S S S	5	do	650/-	(10)
11	Sh. Prem Kumar S/o Sh. Jagdish Pal R/o 457/101 Lady Hardinge	do	S S S S S S S	5	do	650/-	(11)
12	Sh. Kuldeep S/o Sh. Khem Chand R/o Palika Dham	do	S S S S S S S	5	do	650/-	(12)
13	Sh. Pawan Kumar S/o Sh. Bijender Pal Singh R/o J-40 Jhanda Nagar Delhi	do	S S S S S S S	5	do	650/-	(13)
	Daily Total		13 13 13 13 5 13	65	G. Total	8450-00	
	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/PS/Chairperson, dt. 16-4-07

15

HEALTH DEPARTMENT

MUSTER ROLL NO. 3571 (From 25-4-07 To 30-4-07)

(51) Daily wages S.No/1.58 Only Ten sheets (1+9=10)

Circle No. VII 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 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	Sh. Narender S/o Sh. Ramphal 3253 Gandhi Nagar Delhi	D/LW Sk	P P P P S P ↔	5	130-00 + CA	650-00	Narender (1)
2	Sh. Sandesh Kumar S/o Sh. Jai Kishan R/o D-II/241 Madanpur	do	P P P P S P ↔	5	do	650-00	Sandesh (2)
3	Sh. Ajay Kumar S/o Sh. Ram Kishan R/o Dakshin Puri	do	P P P P S P ↔	5	do	650-00	Ajay (3)
4	Sh. Layak Ram S/o Sh. Babulal R/o D-II Ambedkar Nagar	do	P P P P S P ↔	5	do	650-00	(4)
5	Sh. Vijay Pal S/o Sh. Suraj Bhan R/o D-II/128 Madanpur	do	P P P P S P ↔	5	do	650-00	(5)
6	Smt. Poonam W/o Sh. Ravi Raj R/o D-II/248 Madanpur	do	P P P P S P ↔	5	do	650-00	Poonam (6)
7	Sh. Mahesh Pal S/o Sh. Rajpor Singh R/o 1190 Jantar Sheeti Mandi Nagpur	do	P P P P S P ↔	5	do	650-00	Mahesh (7)
	Daily Total		7 7 7 5 7 ↔	35	G. Total	4550-00	
	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.