

Approved No- 1701/851 Chairperson dt 16-11-07

HEALTH DEPARTMENT

20. Working ...
cant sheet No 4

MUSTER ROLL NO.

(From ... To ...)

(From ... To ...)

Circle No. 11 Voucher No. Dated

In continuation of Muster Roll No. 25.5.8

PART-NOMINAL-ROLL

Accountant (HG)

OFFICE MEDICAL OFFICER

S.No.	Name, Father's/Husband's Name & Address grouped according to classes	Designation	Dates From To																															Total	Rate	Amount	Sign/ or thumb impression of payee and dated initials of paying officer made at the time of payment			
			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							
17.	Sh. Vinod s/o Sunderlal, 3735 Juggal Comp Sultun Puri,		P	P	P	P	P	P	P	P	P	P	P	P	P	P	P	P	P	P	P	P	P	P	P	P	P	P	P	P	P	P	P	P	P	22	12710	2597-00	[Signature]	
18.	Smt Deepmala w/o Ashok, 202 Harijan Basti,		P	P	P	P	P	P	P	P	P	P	P	P	P	P	P	P	P	P	P	P	P	P	P	P	P	P	P	P	P	P	P	P	P	25	11	3506-00	[Signature]	
19.	Laxmi w/o Ram Babu, 18/339 Kaljar Puri.		P	P	P	P	P	P	P	P	P	P	P	P	P	P	P	P	P	P	P	P	P	P	P	P	P	P	P	P	P	P	P	P	P	24	11	3116-00	[Signature]	
20.	" Amit s/o Om Prakash, B-506 Andare Puri.		P	P	P	P	P	P	P	P	P	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	11	3506-00	[Signature]	
21.	Sh. Veersingh s/o Jogan, 2/48 Tirlok Puri		P	P	P	P	P	P	P	P	P	P	P	P	P	P	P	P	P	P	P	P	P	P	P	P	P	P	P	P	P	P	P	P	P	25	11	2856-00	[Signature]	
	Daily Total																																				507	G. Total	65829-00	[Signature]

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.

Approved No - 1701/PS/Chairperson dt 16-4-07

HEALTH DEPARTMENT

②0 Dadywager sr/157
Cont Sheet No-3

MUSTER ROLL NO.

Circle No. 111 Voucher No. 3610 Dated 1-8-07 (From 1-8-07 To 31-5-07)

In continuation of Muster Roll No. 2568

PART-NOMINAL-ROLL

S.No.	Name, Father's/Husband's Name & Address grouped according to classes	Designation	Dates From To																															Daily Total	Initials of person marking the daily attendance	Initials of Inspecting Officer	Pay Rs. (Rupees)						
			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										
12.	Sh. Sunder s/o Lal Singh G. 9 Palika Dharm.		P	P	P	P	P	P	P	P	P	P	P	P	P	P	P	P	P	P	P	P	P	P	P	P	P	P	P	P	P	P	P	P	P	P	P	P	37	3506-00	127.00	50218-00	
13.	Sh. Indrajit s/o Parbush G. 11 Palika Dharm.		P	P	P	P	P	P	P	P	P	P	P	P	P	P	P	P	P	P	P	P	P	P	P	P	P	P	P	P	P	P	P	P	P	P	P	P	45	3506-00	11	3246-00	
14.	Sh. Babubhai Hekla W. 11 Palika Dharm.		P	P	P	P	P	P	P	P	P	P	P	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	3506-00	11	3506-00		
15.	Sh. Raj Kumar s/o Purnan, F. 11 Palika Dharm.		P	P	P	P	P	P	P	P	P	P	P	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	3506-00	11	3506-00		
16.	Sh. Anil s/o Gulab Singh A-89 Naglae Delhi.		P	P	P	P	P	P	P	P	P	P	P	P	P	P	P	P	P	P	P	P	P	P	P	P	P	P	P	P	P	P	P	P	P	P	18	3506-00	11	2337-00			

Accountant (HG)

CHIEF MEDICAL OFFICER

Sign, or thumb impression of payee and dated initials of paying officer made at the time of payment

Accountant (HG) M.O.H. Sr. A.O. Certified that the workers mentioned in the muster roll were actually employed by me on NDMC works) 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

Rs. P.

Total amount paid (in words) Rupees

Approved No. 1701/1991 Chouk's permission dt 16-4-07

HEALTH DEPARTMENT

26 Baikybaggi sk/12/155
Cant - Skud 2

MUSTER ROLL NO. 3610

(From 1-5-07 To 31-5-07)

Circle No. 14 Voucher No. Dated

In continuation of Muster Roll No. 3599

PART-NOMINAL-ROLL

S.No.	Name, Father's/Husband's Name & Address grouped according to classes	Designation	Dates From..... To.....																															Daily Total	Initials of person marking the daily attendance	Initials of Inspecting Officer	
			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				
6.	Smt Rutamani w/o Badh Ram 255 GE Thangia Puru.		P	P	P	P	P	P	P	P	P	P	P	P	P	P	P	P	P	P	P	P	P	P	P	P	P	P	P	P	P	P	P	P	P	P	P
			Total																																		
					Rs.	P.																															
7.	Sh saurya s/o Kaurkhan sh.Rahul s/o Mamma		P	P	P	P	P	P	P	P	P	P	P	P	P	P	P	P	P	P	P	P	P	P	P	P	P	P	P	P	P	P	P	P	P	P	
			Total																																		
					Rs.	P.																															
8.	Sh. Vijay s/o Daya Ram 906. Tyoti Village,		P	P	P	P	P	P	P	P	P	P	P	P	P	P	P	P	P	P	P	P	P	P	P	P	P	P	P	P	P	P	P	P	P		
			Total																																		
					Rs.	P.																															
9.	Sh. Rajesh s/o Sukhal F-268 madan Gur,		P	P	P	P	P	P	P	P	P	P	P	P	P	P	P	P	P	P	P	P	P	P	P	P	P	P	P	P	P	P	P	P	P		
			Total																																		
					Rs.	P.																															
10.	Sh. Yogesh s/o Jagga, 341, Harijan Basti,		P	P	P	P	P	P	P	P	P	P	P	P	P	P	P	P	P	P	P	P	P	P	P	P	P	P	P	P	P	P	P	P	P		
			Total																																		
					Rs.	P.																															
11.	Sh. ShyamSunder s/o Babul C-33/93 Kalya Bari Nary		P	P	P	P	P	P	P	P	P	P	P	P	P	P	P	P	P	P	P	P	P	P	P	P	P	P	P	P	P	P	P	P	P		
			Total																																		
					Rs.	P.																															
					Rs.	P.																															

Accountant (HG),

CHIEF MEDICAL OFFICER

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.

Pay Rs. (Rupees)

Grand Total of this Muster Roll ...	Rs. 34147-00	P.
Deduct-Payment made, as per details transferred to Register of Unpaid Wages		
Total amount paid (in words) Rupees		
Balance Paid		

Approval No. 1704/183/Chairperson, dt-16-11-07

HEALTH DEPARTMENT

MUSTER ROLL NO. 3610

(From 1-5-07 To 31-8-07)

86 Saini Nagar S.K. 1.53
Only five sheet (1+4=5)

Circle No. IV Voucher No. Dated

In continuation of Muster Roll No. 3568

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																															Total	Rate	Amount	Sign or thumb impression of payee and dated initials of paying officer made at the time of payment		
			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						
1.	Smt. Sheela w/o Yegraj G. 203 Duskshira Puri G. 203		P	P	P	P	P	P	P	P	P	P	P	P	P	P	P	P	P	P	P	P	P	P	P	P	P	P	P	P	P	P	P	P	P	25	12740	3246-00	
2.	Smt. Rajiwo w/o Kantsel Singh 137 Lady Harding 2A. Sh. Duni s/o Parvati		P	P	P	P	P	P	P	P	P	P	P	P	P	P	P	P	P	P	P	P	P	P	P	P	P	P	P	P	P	P	P	P	16	11	779-00		
3.	Sh. Gurbhain s/o Banwara I 263 Magal Puri.		P	P	P	P	P	P	P	P	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	11	3506-00		
4.	Sh. Jateender s/o Lekhmidanta SOS Paudera Rd Shadher.		P	P	P	P	P	P	P	P	P	P	P	P	P	P	P	P	P	P	P	P	P	P	P	P	P	P	P	P	P	P	P	25	11	3246-00			
5.	Smt. Kailashi Kailashi Smt. Kaitori w/o Madan Lal 17/26 Tirdok Puri		P	P	P	P	P	P	P	P	P	P	P	P	P	P	P	P	P	P	P	P	P	P	P	P	P	P	P	P	P	P	P	25	11	3246-00			
			Daily Total																																				
			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.
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