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

HEALTH DEPARTMENT

MUSTER ROLL NO. 3613 (From 1-5-07 To 31-5-07)

(51) Dailywager S.K.B/L.B Contr. Award No. 10.

Circle No. VII Voucher No. 38/H Dated 7/6/07

In continuation of Muster Roll No. 3171

PART-NOMINAL-ROLL

Accountant (HG) CHIEF MEDICAL OFFICER

S.No.	Name, Father's/Husband's Name & Address grouped accccrding 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 R-7 Ganesh Eastern Court N Delhi	DW		26	127.00	3376.00	Paid
49	Sh Amit Raj S/o Raj Kumar R/o E-45 Gali No 10 Pakangaj	"		25	"	3246.00	Paid
50	Smt Mukesh Kumari W/o Vinod R/o 5/246 Kalyan Puri	"		27	"	3506.00	Paid
51	Sh Neeraj Kr Sinha Rehar Sinh R/o 79 DDA Flats Tilak Nagar New Delhi	"		27	"	3506.00	Paid
	Pay to Staff					169711	
	Daily Total			1307	G. Total	469971.00	
	Initials of person marking the daily attendance						
	Initials of Inspecting Officer						

Pay Rs. ..... (Rupees Four lacs sixty nine thousand seven hundred eleven only) 169711

Accountant (HG) (M. C. MISHRA) (A.O. (Public Health) N.D.M.C., Palika Kendra)

M.O.H. Sr. A.O. (PH)

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.

Released for Payment A.O. (Public Health) N.D.M.C., Palika Kendra

VERIFIED FOR CASH/CHEQUE PAYMENT

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. 3513 (From 1-5-07 To 31-5-07)

(51) Dailywages S.Ks/L.Bs Const. shed No. 9.

Circle No. VII Voucher No. ..... Dated .....

In continuation of Muster Roll No. 3571

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
45	Hans Raj S/o Chandan Singh R/o 2013 Block E Janakpuri Pur	D/W		27	Rs-4.	3506.00	Sign Attested PS-1 (49)
46	Manoj Kumar S/o Jagdish R/o W/146 Lodhi Colony			26		3376.00	Sign Attested PS-1 (47)
46	Vikash S/o Sh. Vinod R/o R-148 East Sagar Pur			26		3376	Sign Attested PS-1 (48)
47	Smt. Beena W/o Sh. Suresh R/o QN 74 Balmiki Basti Mandir Marg NDM			26		3376.00	Sign Attested PS-1 (47)
			Daily Total	1202	G. Total	15677	
			Initials of person marking the daily attendance				
			Initials of Inspecting Officer				

Pay Rs. 15677 (Rupees ~~Fifteen thousand six hundred seventy seven only~~ Six thousand seventy seven only)

Accountant (HG) M.O.H. ~~Sr. A.O (PH)~~

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. 170/13/Chairperson, dt. 16-4-07

HEALTH DEPARTMENT

MUSTER ROLL NO. 3613 (From 1-5-07 To 31-5-07)

(51) Sanitary worker S.No 1/c.Bs
Cont. Sheet No. 8.

Circle No. VII Voucher No. ..... Dated .....

In continuation of Muster Roll No. 3571

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
40	Sh Vinod S/o Ram Phal R/o J.J. 273 Lady Harding	DW		27	127.45	3506.00	Clinal (40)
41	Sh Vikas S/o Mukesh Kumar R/o Gandhi Sadan P.K. Road	do		25	do	3246.00	Vikas (41)
42	Sh Arun Kumar S/o Dm Bulaki R/o 39/4 Moore Greater Kailash Park	do		24	do	3116.00	3120-VI. (42)
43	Smt Meena w/o Sh Vinod Kumar R/o Bapu Dham N Delhi	do		26	do	3376.00	मीना (43)
	Daily Total			1097	G. Total	142413 / 142703.00	
	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

MUSTER ROLL NO. 3613 (From 1-5-07 To 31-5-07)

(51) Dailywager S.K.B/L.B.B Cond. sheet No. 7.

Circle No. VII Voucher No. ..... Dated .....

In continuation of Muster Roll No. 3571

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. Praveen S/o Veerendra R/o D-15/152 Madangir	D/W	P	P	P	P	P	S	P	P	P	P	P	P	S	P	P	P	P	P	P	S	P	P	P	P	P	P	S	P	P	P	P	24	113.40 + CA	2726.00	प्रवीन (36)
37	Smt Bhorkali w/o Hanikam R/o Balmiki Sadan Mandir Marg	do	P	P	P	P	P	S	P	P	P	P	P	P	S	P	P	P	P	P	P	S	P	P	P	P	P	P	S	P	P	P	P	24	do	2726.00	(37)
38	Sh. Jitender S/o Sh. Hafe Sh. R/o Nome Staff Quarter Lady Harding Hospital	do	A	A	A	A	S	A	A	A	A	A	S	A	A	A	A	A	S	A	A	A	A	S	A	A	A	A	S	A	A	A	A	NIL	do	NIL	(38)
39	Ravi Kumar S/o Rakesh R/o Aligarj Nizam.	do	P	P	P	P	S	P	P	P	P	P	S	P	P	P	P	P	S	P	P	P	P	S	P	P	P	P	S	P	P	P	P	27	do	3506.00	Ravi (39)
		Daily Total					S						S									S							S					995	G. Total	129199 1,29,159.00	
		Initials of person marking the daily attendance																																			
		Initials of Inspecting Officer					S						S									S							S								

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

Accountant (HG)

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

M.O.H. Sr. A.O

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

(51) Daily wages S.Ks/L.Bs Cont. sheet No. 6.

MUSTER ROLL NO. 3613 (From 1-5-07 To 31-5-07)

Circle No. VII Voucher No. ..... Dated .....

In continuation of Muster Roll No. 3571

Accountant (HG) CHIEF MEDICAL OFFICER

PART-NOMINAL-ROLL

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

S.No.	Name, Father's/Husband's Name & Address grouped accrding 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	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 Delhi Lodhi Rd	DW	P	P	P	P	P	S	P	P	P	P	P	P	S	P	P	P	P	P	P	S	P	P	P	P	P	P	S	P	P	P	P	26	127.40 + CA	3376.40	(31)
32	Sh Parveen Kumar S/o Sh Jogender R/o 1120 Sector E Pocket Masa	do	P	P	P	P	P	S	P	P	P	P	P	P	S	P	P	P	P	P	P	S	P	P	P	P	P	P	S	P	P	P	P	25	do	3246.00	(32)
33	Sh Bansi Lal S/o Mohar Singh R/o C-571 Abedkar Vihar	do	P	P	P	P	P	S	P	P	P	P	P	P	S	P	P	P	P	P	P	S	P	P	P	P	P	P	S	P	P	P	P	27	do	3506.00	(33)
34	Pradeep S/o Prem Singh R/o 5-30 Balmiki Sadan	do	P	P	P	P	P	S	P	P	P	P	P	P	S	P	P	P	P	P	P	S	P	P	P	P	P	P	S	P	P	P	P	27	do	3506.00	(34)
35	Sh Vikram S/o Sh Rohtash Kumar R/o Delhi Lodhi Road	do	P	P	P	P	P	S	P	P	P	P	P	P	S	P	P	P	P	P	P	S	P	P	P	P	P	P	S	P	P	P	P	25	do	3246	(35)
	Daily Total							S								S							S							S				926	G. Total	120,501.00 120241	
	Initials of person marking the daily attendance							S								S							S							S							
	Initials of Inspecting Officer							S								S							S							S							

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/PO/Chairperson, dt. 16-4-07

HEALTH DEPARTMENT

MUSTER ROLL NO. 3613 (From 1-5-07 To 31-5-07)

(31) Daily wager S.K.B/C.B.O Const. sheet No. 5

Circle No. VII Voucher No. ..... Dated .....

In continuation of Muster Roll No. 3571

PART-NOMINAL-ROLL

Accountant (HG) CHIEF MEDICAL OFFICER

S.No.	Name, Father's/Husband's Name & Address grouped accccrding 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 Vinod R/o 56 Manoor Marg	Mus SK		27	127-40	3506-00	Paid
26	Sh Birjesh S/o Sh Tham Singh R/o Indra Camp Lodhi Road	do		27	do	3506-00	Paid
27	Sh Ashok Kumar S/o Sh Lok Mani Singh R/o 20A 3/0 Sahid Odam Singh	do		27	do	3506-00	Paid
28	Sh Sanjay Kumar S/o Sh Gir Wari R/o 10/21 Trilok Puri	do		27	do	3506-00	Paid
29	Sh Mukesh S/o Sh Atma Ram R/o C-28 Machi Pur	do		26	do	3376-00	Paid
30	Sh Dharmender Kumar S/o Sh Kanhiya Lal R/o A 25 Shastri Park Gali No 8	do		27	do	3506-00	Paid
	Daily Total			796	G. Total	1,03361-00	
	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

MUSTER ROLL NO. 3613 (From 1-5-07 To 31-5-07)

(51) Vaikyuagar S.Ka/L.Bo Cont. sheet No. 4.

Circle No. VII Voucher No. ..... Dated .....

In continuation of Muster Roll No. 3571

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
19	Sh Satish Kumar S/o Sh Bhagwandas R/o 2359 Gali Khagan Sitaram Sita Ram Bazar	DW SK		18	127.40 + CA	2337.00	
20	Sh Rajiv Kumar S/o Sh Ravinder R/o 9-8 Ward No 2 Mehrauli	do		25	do	3246.00	
21	Sh Anil Kumar S/o Sh Om Prakash R/o Gali No 19 Batam Puri	do		26	do	3376.00	
22	Sh Sachin Kumar S/o Sh Billu R/o 196 Gulabi Bagh	do		27	do	3506.00	
23	Sh Manoj Kumar S/o Sh Arjun Singh R/o 298/96 Meer Dam R.M.L. Hospital	do		27	do	3506.00	
24	Sh Nitin S/o Sh Ashok Kumar R/o 55 East Ranjeet Nagar	do		27	do	3506.00	
	Daily Total		24 22 24 24 24 5 24 24 24 22 22 5 24 24 24 24 24 24 5 24 22 22 24 24 5 22 24 24 22	635	G. Total	82455-00	
	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

MUSTER ROLL NO. 3613 (From 1-5-07 To 31-5-07)

(51) Daily wager S.K.S/L.B.S Contr. sheet No. 3.

Circle No. VII Voucher No. ..... Dated .....

In continuation of Muster Roll No. 3571

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
14	Sh. Rajiv S/o Sh. Nafe Singh R/o Staff quarter Lady Harding	O/w SK	P P P P P S P P P P P S P P P P P S P P P P P S P P P P P S P P P	27	R7-40 + CA	3506-00	Paid Rajiv (14)
15	Sh. Vikas S/o Sh. Nafe Singh R/o Staff Quarter Lady Harding	do	P P P P P S P P P P P S P P P P P S P P P P P S P P P P P S P P P	27	do	3506-00	Paid Faraiza (15)
16	Smt. Poonam W/o Sh. Ghanshyam R/o Gali No. 9 Zakir Pur Palam New Delhi	do	P P P P P S P P P P P S P P P P P S P P P P P S P P P P P S P P P	27	do	3506-00	Paid Poonam (16)
17	Sh. Rakesh S/o Sh. Hargulal R/o S-4 PR Palam	do	P P P P P S P P P P P S P P P P P S P P P P P S P P P P P S P P P	27	do	3506-00	Paid Rakesh (17)
18	Sh. Rajesh Nandan S/o Sh. Karamchand R/o Mandar wali Delhi	do	P P P P P S P P P P P S P P P P P S P P P P P S P P P P P S P P P	27	do	3506-00	Paid Rajesh (18)
	Daily Total		18 18 18 18 18 S 18 18 18 18 18 S 18 18 18 18 18 S 18 18 18 18 18 S 18 18 18 17	485	G. Total	62978-00	
	Initials of person marking the daily attendance						
	Initials of Inspecting Officer		SE SE SE SE				

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		

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

CR

HEALTH DEPARTMENT

MUSTER ROLL NO. 3613 (From 1-5-07 To 31-5-07)

(57) Dailywager S.K.S/L.B.S Cond. sheet No. 2.

Circle No. VII Voucher No. ..... Dated .....

In continuation of Muster Roll No. 3571

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
8	Sh Anil Kumar S/o Sh Hukam Chand R/o 23/304 Trilok Puri	D/W Sh	P P P P P S P P P P P S P P P P P S P P P P P S P P P P P S P P P	27	127.40 + CA	3506.00	Paid Anil Kumar (8)
9	Sh Sushil Kumar S/o Sh Hukam Chand R/o 23/304 Trilok Puri	do	P P P P P S P P P P P S P P P P P S P P P P P S P P P P P S P P P	27	do	3506.00	Paid सुशील (9)
10	Sh Laxman Prashad S/o Sh Mohan Lal R/o M-50 Seelam Pur	do	P P P P P S P P P P P S P P P P P S P P P P P S P P P P P S P P P	27	do	3506.00	Paid लक्ष्मण प्रसाद (10)
11	Sh Prem Kumar S/o Sh Jagdish Pd R/o 45/101 Lady Harding	do	P P P P P S P P P P P S P P P P P S P P P P P S P P P P A 26	26	do	3376.00	Paid Prem Kumar (11)
12	Sh Kuldeep S/o Sh Khem Chand R/o Palika Dhan	do	P P P P P S P P P P P S P P P P P S P P P P P S P P P P P S P P P	27	do	3506.00	Paid Kuldeep (12)
13	Sh Pawan Kumar S/o Sh Bijender Pal Singh R/o J-411 Jhatikara Ext Pur	do	P P P P P S P P P P P S P P P P P S P P P P P S P P P P P S P P P	27	do	3506.00	Paid पवन कुमार (13)
	Daily Total		13 13 13 13 13 S 13 13 13 13 13 S 13 13 13 13 13 S 13 13 13 13 13 S 13 13 13 12	350	G. Total	45448.00	
	Initials of person marking the daily attendance		W W W W W S W W W W W S W W W W W S W W W W W S W W W W				
	Initials of Inspecting Officer		S S S S				

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

Grand Total of this Muster Roll 51810-

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.

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

HEALTH DEPARTMENT

MUSTER ROLL NO. 3613 (From 1-5-07 To 31-5-07)

(51) Daily wages 8 hrs / 2.5 hr
Only Ten sheets (1+9=10)

Circle No. VII Voucher No. ..... Dated .....

In continuation of Muster Roll No. 3571

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
1	Sh Narender S/o Sh. Ram Phal R/o 2313 Gandhi Nagar	D/W Sh	P	P	P	P	P	S	P	P	P	P	P	P	S	P	P	P	P	P	P	S	P	P	P	P	P	P	S	P	P	P	P	27	12540 CIA	3506.00 Paid	(1)
2	Sh Sandesh Kumar S/o Sh Jaikishan R/o D-1F/241 Madanpur	D/W Sh	P	P	P	P	P	S	P	P	P	P	P	P	S	P	P	P	P	P	P	S	P	P	P	P	P	P	S	P	P	P	P	27	—	3506.00 Paid	Sandesh (2)
3	Sh Ajay Kumar S/o Sh Ram Kishan R/o Dakshin Puri	D/W Sh	P	P	P	P	P	S	P	P	P	P	P	P	S	P	P	P	P	P	P	S	P	P	P	P	P	P	S	P	P	P	P	27	—	3506.00 Paid	(3)
4	Sh Layak Ram S/o Sh Babu Lal R/o D-1F Ambedkar Nagar	D/W Sh	P	P	P	P	P	S	P	P	P	P	P	P	S	P	P	P	P	P	P	S	P	P	P	P	P	P	S	P	P	P	P	27	—	3506.00 Paid	Ajay (3)
5	Sh Vijay Pal S/o Sh. Suraj Bhan R/o D-1F 170 Madanpur	D/W	P	P	P	P	P	S	P	P	P	P	P	P	S	P	P	P	P	P	P	S	P	P	P	P	P	P	S	P	P	P	P	27	—	3506.00 Paid	विजयपाल (5)
6	Smt Sheela w/o Sh Babu Ram R/o J.J. Camp Mangolpuri Delhi	D/W	P	P	P	P	P	S	P	P	P	P	P	P	S	P	P	P	P	P	P	S	P	P	P	P	P	P	S	P	P	P	P	27	—	3506.00 Paid	शीला (6)
7	Sh Mahesh Pal S/o Sh Balbir Singh R/o 1190 Jantafalati Nand Nagari	D/W	P	P	P	P	P	S	P	P	P	P	P	P	S	P	P	P	P	P	P	S	P	P	P	P	P	P	S	P	P	P	P	27	—	3506.00 Paid	महेश (7)
	Daily Total		7	7	7	7	7	S	7	7	7	7	7	7	S	7	7	7	7	7	7	S	7	7	7	7	7	7	S	7	7	7	7	189	G. Total	24542.00	
	Initials of person marking the daily attendance																																				
	Initials of Inspecting Officer							S							S							S							S								

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

27268

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.