

MUSTER ROLL NO. 3690

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

Circle No. XIV Voucher No. 3578 Dated

In continuation of Muster Roll No.

PART-NOMINAL-ROLL

Accountant (HG) *S*

CHIEF MEDICAL OFFICER *R*

S.No.	Name, Father's/Husband's Name & Address grouped according to classes	Designation	Dates From..... To.....																															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	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											
.....									
		Daily Total																																G. 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.

Sanitation Officer

Chief Sanitation Inspector

Sanitation Inspector

Asst. Sanitation Inspector

