

Approval No. 951/PS/Chairperson,

HEALTH DEPARTMENT

MUSTER ROLL NO. 3664

(From 1-6-07

To 22-6-07

Signature of Chairperson: S. K. / L. R. S. (Signature)

Circle No. V Voucher No. 3611

Dated 11/7/07

In continuation of Muster Roll No. 3611

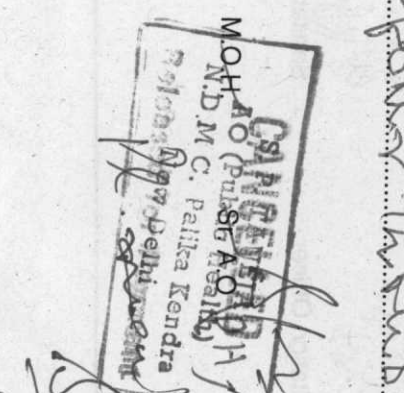
PART-NOMINAL-ROLL

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 | | | | | | |
| 16 | Sm. Ramesh S/O Asrok 16/187 Thakur Km. D. | | 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 | 19 days |
| 17 | Sm. Rohit S/O Asrok 62 No. Shukra Km. D. | | 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 | 15 days |
| 18 | Sm. Ramesh Kumar S/O Nandan Singh 81/1270 Thakur Km. D. | | 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 | 16 days | |
| 19 | Sm. Anil S/O Puri Singh 81/185 Thakur Km. D. | | 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 | 15 days | | |
| 20 | Sm. Sushil S/O Pandey 10/0 Honster Bdr. Badrini Ki mch | | 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 | 17 days | | |
| | Pay Rs. 44960 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | 34 days | |
| | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | G. Total |
| | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | 44960 |
| | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | 44960 | |

Accountant (HG) SINGH
Certified that the workers mentioned in the muster roll were actually employed in the 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. 981/PS/1st person, dtd-24.2.07

HEALTH DEPARTMENT

MUSTER ROLL NO. 3654

(From 01-06-07 To 22-06-07)

80 Daily wages 5.00/LR8
Only Four Sheets (1+3=4)

Roll No. 10 Voucher No. 3611 Dated 22-06-07

Continuation of Muster Roll No. 3611

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..... | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | 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 | SM. Sanjay S/o Ram Singh 17/188 Tinkodkhi D. | | 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 | 17 days | Rs. P. 2469.00 | Signature and dated initials of paying officer made at the time of payment |
| 7 | SM. Santib S/o Prabhaw Lal 12/B Seenukh D. | | 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 days | Rs. P. 2079.00 | Signature and dated initials of paying officer made at the time of payment | |
| 8 | SM. Vikash S/o Ram Lal 85/273 NS - 7 (GPO) | | 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 | 15 days | Rs. P. 1949.00 | Signature and dated initials of paying officer made at the time of payment | |
| 9 | SM. Mohism S/o Santal 16/133 Tinkodkhi D. | | 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 | 15 days | Rs. P. 1949.00 | Signature and dated initials of paying officer made at the time of payment | | |
| 10 | SM. Arun S/o Baramchand 137 DD A Unit 2 20/Sida area | | 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 | 17 days | Rs. P. 2209.00 | Signature and dated initials of paying officer made at the time of payment | |
| | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | 16 days | Rs. P. 2183.00 | G. Total 2169.00 |

Pay Rs. (Rupees)

Accountant (HG)

M.O.H. Sr. A.O

Grand Total of this Muster Roll

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

| | |
|-----|----|
| Rs. | P. |
|-----|----|

Sanitation Officer

Chief Sanitation Inspector

Approved No. 95/PS/2/2007

HEALTH DEPARTMENT

MUSTER ROLL NO. 3664

(From 1-6-07

To 22-06-07)

20 Daily wages S 10/L 1. Rs
Cont. Award No. 4.

Circle No. V Voucher No. Dated

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 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | 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 | | | | | | |
| 1 | Sm. Nand Lal S/o Margot Poon E 79/A Shri Ganesh Shri Ganesh | | 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 | 127.00 + CA | 2339.00 | (Signature) |
| 2 | Sm. Beena W/o Fairy. Chandel | | 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 | 1429.00 | 1559 | (Signature) | |
| 3 | Sm. Nikal S/o Ragesh 80-2/2nd road officer road | | 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 | 1800 | 2334.00 | (Signature) | |
| 4 | Sm. Mahesh S/o Shyam Lal A 10th main cross | | 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 | 1900 | 2669.00 | (Signature) | | |
| 5 | Mahender S/o Chagga Poon 318 Dog Road | | 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 | 96 | 11175 | (Signature) | | |
| | Initials of person marking the daily attendance | Initials of Inspecting Officer | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | G. Total | | 11175 | | | |

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.

Sanitation Officer Chief Sanitation Inspector Sanitation Inspector Grand Total of this Muster Roll ... Balance Paid

Deduct-Payment made, as per details transferred to Register of Unpaid Wages Total amount paid (in words) Rupees

| Rs. | P. |
|-----|----|
| | |