Approval No. 2980/PS/Chairman, dt- 11-6-07

HEALTH DEPARTMENT

MUSTER ROLL NO. 3696 (From 2.7.07 To 31-7-07)

(26) Dailywager 2-Ks/2-Bs Cont. sheet No. 5.

Circle No. IV Voucher No. ¥ 70/H Dated 10/8/07

In continuation of Muster Roll No. Fresh

Accountant (HG), 60032-00 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
21	Sh. Anoop S/o Ramesh F-11, Ali Ganj N.D.	D/W	P P P P P P P S P P P P P A S P P P P P P S P P P P P S P P	25	127.40 +66-00	3249-00	3249
22	Sh. Karan S/o Ram Niwas S-212/191 Netaji Nagar N.D.	"	P 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 P S P P	26	11	3378-00	KARAN
23	Sh. Ramesh S/o Rishal 172, Sunder Nagar Najab Garh Delhi	"	P L L L L L L S K S S S	6	11	780-00	
24	Smt Geeta W/o Surender Ro.	"	P P P P P P S P P P P P P P S P P P P P P S P P P P P S P P	26	11	3378-00	
25	Smt Rani W/o Dalip Kumar	"	P P P P P P S P P P P P P P S P P P P P P S P P P P P S P P	26	11	3378-00	
	Vacant						
	Daily Total →		S S S S	57	G. Total	74195-00	
	Initials of person marking the daily attendance →						
	Initials of Inspecting Officer →		S S S S				

Pay Rs. 74195/- (Rupees Rs. Seventy four thousand one hundred ninety five only)

Accountant (HG) MISHRA for (S) Public Health) N.D.M.C. Dispensary Kendra

M.O.H.

Sr. A.O. CASHED Released for Payment

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.

S No 1 to 25 Sheets

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.

CERTIFIED FOR CASH/CHEQUE PAYMENT Head Cashier

Receipt on 7/8/07 at 3-PM. entry in page no 6 serial no 1244 dt 7/8/07

SC/ST 3/8

Approval No. 2930/PS/Chairman, dt-11-6-07

HEALTH DEPARTMENT

MUSTER ROLL NO. 3696 (From 2.7.07 To 31-7-07)

(26 Daily wages Sikh/L.Bs Cond. sheet No. 4,

Circle No. IV Voucher No. Dated

In continuation of Muster Roll No. Fresh

Accountant (HG), 46258-00 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
16	Smt Raj Wati w/o Balbir E-4/25 Sultan Puri Delhi	DIW	P P P P P P P S P P P P P P S P P P P P P P S P P P P P P S P P	26	127.40 +66.00	3378-00	
17	Smt. Poonam w/o Parkash E-117, New Ranjit Nagar Delhi	II	P P P P P P P S — — — — — — S — — — — — — S — — — — — — S	6	11	780-00	
18	Sh. Sachin s/o Jagbir E-117, New Ranjit Nagar Delhi	II	L L L L L L L S L L L L L L S L L L L L L S L L L L L L S L L	25	11	3249-00	
19	Smt Meena w/o Parkash Gi-131, Vill-Rajhola Delhi	II	P P P P P P P S P P P P P P S P P P P P P P S P P P P P P S P P	26	11	3378-00	
20	Sh. Arjun s/o Harlal 514, Ali Ganj N.D.	II	P P P P P P P S P P P P P P S A A P P P P S A P P P P P S P D	23	11	2989-00	
	Daily Total		S S S	462	G. Total	60032-00	
	Initials of person marking the daily attendance		S S S				
	Initials of Inspecting Officer		S S S				

L = Leave duty

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.

A/11 No. 2980/Ps/Chairman, dt-11-6-07

HEALTH DEPARTMENT

MUSTER ROLL NO. 3696 (From 2.7.07 To 31-7-07)

(26) Sarbjyagar S-Ka/L.Ba Cont. sheet No. 3.

Circle No. IV Voucher No. Dated.

In continuation of Muster Roll No. Fresh

Accountant (HG), 33393-00 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
11	Smt Seema W/o Sukarh A-101, Ranjeet Nagar Delhi	D/W	P P P P P P P S P P P P P P P S P P P P P P P S P P P P P P P S P P P	22	127.40 166-00	2859-00	
12.	Sh. Rajinder s/o Ribhu Dayal 74, New Gaurav Park Delhi	"	P P P P P P P S P P P P P P P S P P P P P P P S P P P P P P P S P P P	25	"	3249-00	
13.	" Ukarh s/o Ranbir T-5441, Baljeet Nagar Delhi	"	P P P P P P P S P P P P P P P S P P P P P P P S P P P P P P P S P P P	26	"	3378-00	
14.	" Satish s/o Parkash E-33, New Ranjit Nagar Delhi	"	→ S S S	1	"	130-00	
15.	Smt Mitlesh W/o Dhirendra 6/77 Bapu Dham N.D.	"	P P P P P P P S P P P P P P P S P P P P P P P S P P P P P P P S P P P	25	"	3249-00	
	Daily Total		S S S S	356	G. Total	46258-00	
	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. 2980/PS/Chairman, dt- 11.6.07

HEALTH DEPARTMENT

MUSTER ROLL NO. 3696 (From 2.7.07 To 31-7-07)

(26) Sailyaraga Sts/L.Rs Cont. sheet No. 2.

Circle No. IV Voucher No. Dated

In continuation of Muster Roll No. Fresh

PART-NOMINAL-ROLL

Accountant (HG) 16632-00 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
6	Sh. Jai Veer S/o Om Parkash 429, Ali Ganj N.D.	D/W	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 P S S P P L = Leave duty	25	127.00 + 66.00	3249-00	
7	Smt. Jyoti W/o Hari Om N-615, Sewa Nagar N.D.	"	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 P S S P P	26	"	3378-00	
8	Sh. Deepak S/o Chamman Lal 7/94 Bapu Dham N.D.	"	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 P S S P P	26	"	3378-00	
9	Smt Seema D/o Kirbla Dayal SE-7, 254, Papan Kalan N.D.	"	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 P S S P P	26	"	3378-00	
10	Smt Urmila W/o Rajender H-511, Kali Bari Marg N.D.	"	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 P S S P P	26	"	3378-00	
	Daily Total		S S S S	25	G. Total	33393-00	
	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. 2980/PS/Chairman, dt- 11-6-07

HEALTH DEPARTMENT

MUSTER ROLL NO. 3696 (From 2-7-07 To 31-7-07)

(26) Daily Wager S.K./L.K.
Only five sheets (44 nos)

Circle No. IV 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.	Smt Geeta W/o Chanmandal E-250, Ranjeet Nagar Delhi	D/W	P 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 P S P P	25	127.40 +66.00	3249-00	
2.	Smt Anju Devi W/o Shyamlal	"	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 P S P P	26	"	3378-00	
3.	Sh. Anil S/o Bhawar Singh V+P.O- 63, Chawla Delhi	"	P P P P P P P S P L L L L L L S P L P L P P P S P L P L P S P P L=2 days duty	26	"	3378-00	
4.	Sh. Bansari S/o Babulal H-141, Tigri Delhi	"	P L L L P L P S L P L L P P P S P P L P L P P P S P L P L P S P P L=2 days duty	26	"	3378-00	
5.	Sh. Shyamlal S/o Om Parkash 429, Ali Ganj N.D.		S P L L L L L L S L L L L L L S P L L L L L L S P L L L L L S P L L=2 days duty	25	"	3249-00	
	Daily Total		S S S S	128	G. Total	16632-00	
	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

Sanitation Officer

Rs.	P.