

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

HEALTH DEPARTMENT

MUSTER ROLL NO. 5697

(From 2-7-07 To 31-7-07)

Accountant (HG) *S*
CHIEF MEDICAL OFFICER *Dr. Baillinger S.K. L.R.S.*
Cond. Sheet No. 4.

Circle No. **V** Voucher No. **7211** Dated **10/8/07**
In continuation of Muster Roll No. **Frash**

Accountant (HG) *S*
CHIEF MEDICAL OFFICER

S.No.	Name, Father's/Husband's Name & Address grouped according to classes	Designation	Dates From..... To.....																															Total	Rate Rs. P.	Amount	Sign. or thumb impression of payee and dated initials of paying officer made at the time of payment	
			Days																																			
			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	Smt. K Rubam w/o. Sambay No 67 Nagole Kas Para Sarai Kale Kluw No. B.		P	P	P	P	P	P	P	P	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 days	127	3119.20	<i>Frash</i>
17	Smt. Babay w/o. Grestam No. K-51 S.S. Camp Tigan. 62		P	P	P	P	P	P	P	P	P	P	P	P	P	P	P	P	P	P	P	P	P	P	P	P	P	P	P	P	P	P	P	23 days	4	2989.20	<i>Frash</i>	
18	Smt. Tulsi w/o. Manmads No. M9870 D. A. <i>Frash</i>		P	P	P	P	P	P	P	P	P	P	P	P	P	P	P	P	P	P	P	P	P	P	P	P	P	P	P	P	P	P	P	12 days	4	1559.20	<i>Frash</i>	
19	Sr. Katin S. Hanu Ram No. A88. Estara 31 Thok Lun. Arla.		P	P	P	P	P	P	P	P	P	P	P	P	P	P	P	P	P	P	P	P	P	P	P	P	P	P	P	P	P	P	23 days	4	2989.20	<i>Frash</i>		
20	Sr. Birshi S. Birhamed. No. 1204 MCD. Sunda Nagari		P	P	P	P	P	P	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	4	2967.20	<i>Frash</i>		
Pay Rs. 61851			Daily Total																															476		61851		

Pay Rs. 61851 (Rupees) 213 130
Initials of person marking the daily attendance
GAD GBS
Initials of Inspecting Officer
SCHHE

Accountant (HG) *S*
CHIEF MEDICAL OFFICER
Dr. Baillinger S.K. L.R.S.
Cond. Sheet No. 4.

Released for Payment
Sr. A.O. (PH)

Grand Total of this Muster Roll ... *fully paid*
Deduct-Payment made, as per details transferred to Register of Unpaid Wages
Total amount paid (in words) Rupees 61851/100
Balance Paid

HEALTH DEPARTMENT

MUSTER ROLL NO. 3697

(From 1.7.08 To 31-7-08)

Signature of S.K.L. B. Sarda, Sheet No. 2.

Circle No. V Voucher No. Dated

In continuation of Muster Roll No. 3697 Fresh

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 Rs. P.	Amount Rs. P.	Sign. or thumb impression of payee and dated initials of paying officer made at 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									
6.	Smt. Greta w/o. Kalandh Ki. No. 2-109 Kirti Nagar N.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	224/-	1274/-	3378/-	[Signature]	
7.	Sharda w/o. Jagdish Ki. No. 3/149 Duv 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	P	P	219.00	3192.00	3192.00	[Signature]
8.	Bu. Anand S. Omkar's No. 1623 S.S. Calangy Bhaska 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	265/-	3378.00	3378.00	[Signature]	
9.	Deebak Ki. S. Vidya No. 5/61 Baba Dham N.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	265/-	3378.00	3378.00	[Signature]	
10.	M. Anil Ki. S. Suman K.L. No. B-91 Gurbak Kothi Calangy Nizkari Nagar N.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	219/-	3235.40	3235.40	[Signature]	
Daily Total																																										
Initials of person marking the daily attendance			→																																							
Initials of Inspecting Officer			→																																							

Pay Rs. (Rupees)

Accountant (HG)

M.O.H.

Sr. A.O

Grand Total of this Muster Roll ...

Deduct-Payment made, as per details transferred to Register of Unpaid Wages

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.

Total amount paid (in words) Rupees: Balance Paid

Rs. P.

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

HEALTH DEPARTMENT

(From 2-7-07 To 31-7-07)

Signature: S.K. J. L. S. B. S.
Only four sheets (1+3-4)

MUSTER ROLL NO. 3694

Circle No. V Voucher No. Fresh Dated 2-7-07

PART-NOMINAL-ROLL

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 Santosh Kumar w/o Sati Sati w/o Sati Sati Add. T. 377A Resti Wazirabad New Delhi.	Daily	P	P	P	P	P	P	P	P	P	P	P	P	P	P	P	P	P	P	P	P	P	P	P	P	P	P	P	P	P	P	P	P	26 days	1271	3378-00	[Signature]
2	Smt Beema w/o Kastish. Add. 676 Babu Alam N.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	26 days	1	3378-00	[Signature]
3	Mr. Sumit G. Sulekhand Add 316 Trilok Buz' 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	23 days	1	2989-00	[Signature]
4	Mr. Kati G. Chandu Blam Add 2117 Babu Alam N.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	23 days	1	2989-00	[Signature]
5	Smt Kani Biji Katan del. M. G. B. Anam Buzh. Panathla Ad N.G.		P	P	P	P	P	P	P	P	P	P	P	P	P	P	P	P	P	P	P	P	P	P	P	P	P	P	P	P	P	P	P	P	26 days	1	3378-00	[Signature]
Daily Total																																				G. Total		

Pay Rs. (Rupees)

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

Accountant (HG) CHIEF MEDICAL OFFICER

RS.	P.
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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.