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

HEALTH DEPARTMENT

MUSTER ROLL NO. 3705 (From 2.7.07 To 31-7-07)

(19) Dailywager S.K/C.Bs Cond- Sheet No 4.

Circle No. XIII 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
17	Vacant						
18	Vacant						
19	Vacant						
			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 Officer

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

HEALTH DEPARTMENT

MUSTER ROLL NO. 37-05 (From 2.7.07 To 31.7.07)

(19) Dairywagar Sks/L.Bs Contd- Sheet No.1.

Circle No. XIII Voucher No. 57/H Dated 10/8/07

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
11.	Smt Sunita w/o Sh. Om Parkash	Dairywager S.K.	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 S P P	28 days	127.40 +CA	3378.00	सुनीता
12.	Sh Deepak s/o Sh. Dharampal	D.W. L.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	25 days	-do-	3249.00	
13.	" Sunil Kr s/o Rajkumar	D.W. L.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	25 days	-do-	3249.00	
14.	" Raju s/o Ramesh.	D.W. L.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	26 days	-do-	3378.00	
15.	" Komal s/o Hariom	L.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	15 days	-do-	1949.00	
16.	" Saikishan s/o Munshi Ram	L.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	18 days	-do-	2339.00	
				372		48339.00	
		Daily Total		373	G. Total	48,469.00	
		Initials of person marking the daily attendance					
		Initials of Inspecting Officer					

Pay Rs. 48339/- (Rupees Forty Eight thousand three hundred thirty Nine only)

Accountant (HG) 5.8.07

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.

VERIFIED FOR CASH/CHEQUE PAYMENT Cashier

CAS... Released for Payment

Recd on 7.8.07 at 3:00 PM Entry No page No. & Serial No. in G. at 7/8/07

Sr(HG) 7/8

Approval No. 2930/RS/Chairperson, dt. ...

HEALTH DEPARTMENT

MUSTER ROLL NO. 3705 (From 2.7.07 To 31-7-07)

(19) Daily wager S.Ks/L.Ds Contd. sheet No. 2.

Circle No. XIII 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
6.	Sh. Vinit Kr S/o Ram Kishan	Daily Wager SK	P P P

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

HEALTH DEPARTMENT

MUSTER ROLL NO. 3705 (From 2.7.07 To 31-7-07) (19) Dailywager S.Ks/L.Bs Only Four Sheets (1+3=4)

Circle No. XIII 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 Daily wages	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 Kusum w/o Sh. Rajesh	Sfk. Daily wages	P P P P P S P P P P P P S P P P P P S P P P P P S P P	26 days	127.40 HCA	3378.-00	Kusum
2.	Smt Kamlesh w/o Sh Dharambel	-do-	P P P P P S P P P P P P S P P P P P S P P P P P S P A	24 days	-do-	3119.-00	
3	Sh. Sanni S/o Sh Surajbhan	do.	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	-do-	3378.-00	
4.	" Ranveer Singh S/o Sh. Balbeer Sh	-do-	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	22 days	-do-	2859.-00	Ranveer
5.	" Nitin S/o Chanderbal	-do-	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	-do-	3378.-00	
	Daily Total		25 25 25 25 25 25 25 25 25 25 25 24 25 25 25 24 25 25 25 25 25 25 25 25 25 25 25 25 25 25 25	124	G. Total	16112.-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.