Approval No. 951/RS/Chairperson, dt 8-24.2-07

HEALTH DEPARTMENT

MUSTER ROLL NO. 3721 (From 1-8-07 To 24-8-07)

Circle No. V Voucher No. 62/H Dated 18/9/07

In continuation of Muster Roll No. 3678

PART-NOMINAL-ROLL 19/9/07

Accountant (HG),

CHIEF MEDICAL OFFICER

Dairywoman S.Ks/L.Bs
Only one sheet.

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 Rajo w/o Sh Satish 85 No Maniam Basti MD.	D/Sweeper	P P P P P S P P P P P S P P P P P H P P P P P S P P P P	20dy	133/4 USEA	2718/20	25/9
2.	Sh. Rajkumar s/o Khem Chand C-48/84 Trilok Puri D.	— do —	P HB P HB P HB P HB P HB P HB P HB P HB P HB P HB P HB P HB P HB P HB P HB P HB P HB P HB P HB P HB P HB P HB P HB P HB P HB P HB	19dy	4	2534/20	21/9/12
3.	Sh. Jeetu s/o Surjeet K. 3162 Trilok Puri D.	— do —	P P P P P