ontingent Bill

Disbursement Type* Cash

Bill Type* Petty Cash

Reference Number for Cash Branch 30 09 1 0800032

Fund * NDMC Municipal General Fund

Bill Date* 11/09/2007

Segment* GENERAL FUND

Sub Segment* CASH IN H

Field* PUBLIC HEALTH ACCOUNTS BRANCH

Sub Field* PUBLIC H

Functionary* NDMC

Sanction By* chairperson

Sanctioned On * 11/06/2007

Sanction Details payment of TMR workers C. No.x

Created By dharampal

Verified By

Confirmed By

Approved By

Final Approved By

Bill Status CREATED

Narration payment of TMR workers C.NO X

Remarks

Function Name	Account Code*	Account Head
Public Health	210 000	SALARIES WAGES AND BONUS

Deductions

Account Code	Account Head	
		0

Deductions	
Net Payable	

Net Payable in words One Lakhs Six Thousand S

*- Mandatory Fields

Back Modify

Contingent Bill

Disbursement Type* Cash

Bill Type* Petty Cash

Reference Number for Cash Branch 30309070800032

Fund * NDMC Municipal General Fund

Bill Date* 11/09/2007

Segment* GENERAL FUND

Sub Segment* CASH IN H/

Field* PUBLIC HEALTH ACCOUNTS BRANCH

Sub Field* PUBLICH H

Functionary* NDMC

Sanction By* chairperson

Sanctioned On * 11/06/2007

Sanction Details payment of TMR workers C. No.x

Created By dharam.pal

Verified By

Confirmed By

Approved By

Final Approved By

Bill Status CREATED

Narration payment of TMR workers C.NO. X

Remarks

Function Name	Account Code*	Account Head
Public Health	2101000	SALARIES,WAGES AND BONUS

Deductions

Account Code	Account Head	
		0

Deductions	
Net Payable	

Net Payable in words One Lakhs Six Thousand Si

*- Mandatory Fields

Back Modify

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

HEALTH DEPARTMENT

MUSTER ROLL NO. 3745 (From 1-8-07 To 31-8-07)

(33) Dailywager S.Ks/L.Bs
Contd. sheet No. 7.

Circle No. X Voucher No. 26/H Dated 19.9.07

In continuation of Muster Roll No. 3702 (1/3 19/9/07)

PART-NOMINAL-ROLL

Accountant (HG). CHIEF MEDICAL OFFICER

Dates From................ To................

S.No.	Name, Father's/Husband's Name & Address grouped according to classes	Designation	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 732	Rate Rs. P.	Amount Rs. P. 9944	Sign. or thumb impression of payee and dated initials of paying officer made at the time of payment
31.	Sh. Rajesh S/o Sh. Parbhu Dayal 96 Balmiki Basti Mandir Marg N.D.						S					P	P	S	P	P	P	P	P	P	S	P	P	P	P	P	P	S	P	P	P	P	P	19 days	133.45 + C.A	98874.00 2584-00	Rajesh (Paid)
32.	Sh. Manoj Kumar S/o Sh. Kanwar Lal												P	S	P	P	P	P	P	P	S	P	P	P	P	P	P	S	P	P	P	P	P	18 days	-do-	2446-00	Paid [illegible]
33.	Sh. Ravi Kumar S/o Sh. Suresh Chand. 26/1 A Block Kusum Pur Pahari N.D.													S		P	P	P	P	P	S	P	P	P	P	P	P	S	P	P	P	P	P	16 days	-do-	2174	Paid [illegible]

Pay to Staff Rs 106678— B I F Rs NU

S A Rs 106678—

Daily Total: 3 3 3 / 3 3 3 3 3 785 G. Total ~~106,070-00~~ 106678

Initials of person marking the daily attendance

Initials of Inspecting Officer

Pay Rs. 106678=00 (Rupees Rs One lakh Six thou[illegible]ndred Seventy Eight only

[illegible] and signature Attested and fully paid

Received on 7/9/07 at 3.15 PM. Entry 16 page No 7 dt 7/9/07 Serial No 141.

VERIFIED FOR CASH/CHEQUE PAYMENT 11.9.07

Head Cashier

CANCELLED 9/ (PH)

Released for (V.K[illegible]) AO (

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.

...al of this Muster Roll ...

...details transferred to Register of Unpaid Wages

...yment made, as p...

Rupees.............................Balance Paid

Rs.	P.

SI-X 24/9/07 SI-X H-84 VOS-I X 24/9/2007

Before Payment to officials at S/no 29 & 32 is made residential address of these officials must be recor[ded]

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

HEALTH DEPARTMENT

MUSTER ROLL NO. 3745 (From 1-8-07 To 31-8-07) (33) dailywager S.Ks/L.F

Cond. Sheet No. 6.

Circle No. X Voucher No. .... Dated ....

In continuation of Muster Roll No. 3702.

PART-NOMINAL-ROLL

Accountant (HG), CHIEF MEDICAL OFFICER

S.No.	Name, Father's/Husband's Name & Address grouped according to classes	Designation	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
							S							S							S							S						645		87649	
26.	Sh. Raj Kr S/o Sh. Veer Singh. 96/B-1 ward No2 Mahroli N.D-		P	P	P	P	S	P	P	P	P	P	P	S	P	A	H	A	P	P	S	P	P	P	A	P	P	S	P	A	P	P	P	22 days	133.45 + C.A	2990-00 Paid	[signature]
27.	Sh. Ravinder S/o Sh. Balbir E4/25 Sultan Puri N.D-		P	A	P	P	S	P	P	P	P	P	P	S	P	P	H	P	P	P	S	P	P	P	P	P	P	S	P	P	P	P	P	26 days	-do-	3533-00 Paid	Ravinder
28.	Sh. Pardeep Kr S/o Sh. Raju C-22 Palika Dham Gole Market N.D-		S →								P	P	P	S	P	P	H	P	P	P	S	P	P	P	P	P	P	S	P	A	A	P	P	18 days	-do-	2446-00 Paid	[signature]
29.	Sh. Vinod Kr Ram S/o Sh. Ghusa Ram		S →								P	P	A	S	A	A	H/A	A	A	A	S	A	A	A	A	A	A	S	A	A	A	A	A	2 days	-do-	272-00 Paid	[signature]
30.	Sh. Vijay Kumar S/o Sh. Banwari Lal 122F (RC) Kishan Ganj N.D-		→									P	P	S	P	P	H	P	P	P	S	P	P	P	P	P	P	S	P	P	P	P	P	19 days	-do-	2584-00 Paid	[thumb impression]
	Daily Total		2	1	2	2	/	2	2	2	4	4	4	/	4	3	3	3	4	4	/	4	4	4	3	4	4	/	4	3	3	3	4	732	G. Total	98814-00 99472	
	Initials of person marking the daily attendance		[initials]																																		
	Initials of Inspecting Officer		[initials]								[initials]					[initials]					[initials]				[initials]					[initials]							

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. 2930/PS/Chairman, dt-11-6-07

HEALTH DEPARTMENT

MUSTER ROLL NO. 3745 (From 1-8-07 To 31-8-07)

(33) Dailywager S.I.s/L.Ts
Cont- sheet No. 5

Circle No. X Voucher No. .... Dated. ....

In continuation of Muster Roll No. 3702.

Accountant (HG), CHIEF MEDICAL OFFICER

PART-NOMINAL-ROLL

Dates From .... To ....

S.No.	Name, Father's/Husband's Name & Address grouped according to classes	Designation	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
							S							S			H				S							S						523			
21.	Sh. Guru Dev S/o Sh. Dharam Singh. H.No-162 Balmiki Basti Mandir Marg N.D.		P	P	P	P	S	P	P	P	P	P	P	S	P	P	H	P	P	P	S	P	P	P	P	P	P	S	P	P	P	P	P	27 days	133.45 + C.A	70470-00 / 3669-00 Paid	[signature]
22.	Sh. Arjun S/o Sh. Beer Singh. 40 Balmiki Basti Mandir Marg N.D.		P	P	P	P	S	P	P	P	P	P	P	S	P	P	H	P	P	P	S	P	P	P	P	P	P	S	P	P	P	P	P	27 days	-do-	3669-00 Paid	[signature]
23.	Sh. Rajeev Kr S/o Sh. Bal Kishan B1/109 Sultan Puri N.D.		P	P	P	P	S	A	P	A	P	P	P	S	P	A	H	P	P	P	S	P	P	P	P	A	P	S	P	A	P	A	P	21 days	-do-	2854-00 Paid	Rajiv Kumar
24.	Smt. Babita D/o Sh. Mool Chand 20/116 Dakshin Puri N.D.		P	P	P	P	S	P	P	P	P	P	P	S	P	P	H	P	P	P	S	P	P	P	P	P	P	S	P	P	P	P	P	27 days	-do-	3669-00 Paid	Babita
25.	Sh. Rajesh Kr S/o Sh. Budh Ram WZ-94 Toda Pur N.D.		A	A	P	P	S	P	P	P	P	P	P	S	P	P	H	P	P	P	S	A	A	A	A	A	P	S	P	P	P	P	P	20 days	-do-	2710-00 Paid	[signature]
	Daily Total		4	4	5	5		4	5	4	5	5	5		5	4	5	5	5	5		4	4	4	4	3	5		5	4	5	4	5	645	G. Total	~~87049-00~~ 87649	
	Initials of person marking the daily attendance		[initials]																																		
	Initials of Inspecting Officer		[initials]																																		

Pay Rs. .... (Rupees ....)

Grand Total of this Muster Roll ... ... | Rs. | P.

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.

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

Total amount paid (in words) Rupees........ Balance Paid

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

HEALTH DEPARTMENT

MUSTER ROLL NO. 3745 (From 1-8-07 To 31-8-07) (33) Rajlywagon S.K.P.P. Comt. Area No 4.

Circle No. X Voucher No. ..... Dated .....

In continuation of Muster Roll No. 3702

PART-NOMINAL-ROLL

Accountant (HG), CHIEF MEDICAL OFFICER

S.No.	Name, Father's/Husband's Name & Address grouped accccrding 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.	Sh. Parvesh Kr S/o Sh. Kishan Lal C-PAT-2 New Seema Puri N.D.		P P P	P P P	P P P	P P P	S	P P P	P P P	P P P	P P P	P P P	P P P	S	P P P	P P P	H P	P P P	P P P	P P P	S	P P P	P P P	P P P	P P P	P P P	S	P P P	P P P	P P P	P P P	27 days	133.45 + C.A	~~3619~~ 3669-00	Paid	
17.	Smt. Chanchal W/o Sh. Babu Lal 4038 Ajit Nagar Gali No-15 Dharam Puri N.D.		A A	P P P	P P P	S	P P P	P P P	P P P	P P P	A	S	P P P	P P P	H P	P P P	P P P	P P P	P P P	S	P P P	P P P	P P P	A	P P P	S	P P P	P P P	A A	P P P	21 days	-do-	2854-00	Paid	
18.	Sh. Naveen Kr S/o Sh. Ishwar Dass WZ 251/1 Village Pusa Road N.D.		P P P	P P P	P P P	S	P P P	P P P	P P P	P P P	P P P	P P P	S	P P P	P P P	P P P	H P	P P P	P P P	P P P	S	P P P	P P P	P P P	P P P	P P P	S	P P P	P P P	P P P	P P P	27 days	-do-	3669-00	Paid	
19.	Sh. Dinesh S/o Sh. Moti Lal A-15 Palika Dham Gole Market N.D.		P P P	P P P	P P P	S	P P P	P P P	P P P	P P P	P P P	P P P	S	P P P	P P P	P P P	H P	P P P	P P P	P P P	S	P P P	P P P	P P P	P P P	P P P	S	P P P	P P P	P P P	P P P	27 days	-do-	3669-00	Paid	
20.	Sh. Sachin S/o Sh. Ramesh 29 Balmiki Basti Mandir Marg N.D.		P P P	P P P	P P P	S	P P P	P P P	P P P	P P P	P P P	P P P	S	P P P	P P P	P P P	H P	P P P	P P P	P P P	S	P P P	P P P	P P P	P P P	P P P	S	P P P	P P P	P P P	P P P	22 days	-do-	2990-00	Paid	
	Daily Total		4	3	2	5	4	4	4	5	5	4		2	2	2	2	2	2		2	2	2	2	4	2		2	4	4	4	523	G. Total	70470-00		
	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. 2930/PS/Chairman, dt - 11-6-07

HEALTH DEPARTMENT

(33) Daily wager S.K./C.B. Cont. sheet No. 3.

MUSTER ROLL NO. 3745 (From 1-8-07 To 31-8-07)

Circle No. X Voucher No. .... Dated ....

In continuation of Muster Roll No. 3702

PART-NOMINAL-ROLL

Accountant (HG),

CHIEF MEDICAL OFFICER

Dates From .... To ....

S.No.	Name, Father's/Husband's Name & Address grouped according to classes	Designation	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
							S							S			H				S							S						269		3555	
11.	Sh. Raghav S/o Sh. Anand Kr. 31 Gandhi Sadan Mandir Marg N.D.		P	P	P	P	S	P	P	P	P	P	P	S	P	P	H	P	P	P	S	P	P	P	P	P	P	S	P	P	P	P	P	27 days	133.45 + C.A.	3594/- 3669-00 Paid	
12.	Sh. Rajesh S/o late Sh. Nanwa 77 Balmiki Basti Mandir Marg N.D.		P	P	P	P	S	P	P	P	P	P	P	S	P	P	H	P	P	P	S	P	P	P	P	P	P	S	P	P	P	P	(A)	26 days	-do-	3533-00 Paid	
13.	Sh. Narender Singh S/o Sh. Rajinder Singh. H. No-257 Meeta Sun Badan Sun N.D.		P	P	P	(A)	S	P	P	P	P	P	P	S	P	P	H	P	P	P	S	P	(A)	P	P	P	P	S	P	P	P	P	P	25 days	-do-	3397-00 Paid	
14.	Smt. Sangeeta W/o Sh. Suresh. 312 Pocket I Dakshin Puri N.D.		P	P	P	P	S	P	P	P	P	P	P	S	P	P	H	P	P	P	S	P	P	P	P	P	P	S	P	P	P	P	P	27 days	-do-	3669-00 Paid	
15.	Smt. Poonam W/o Sh. Jagdish. 116 Balmiki Basti Mandir Marg N.D.		P	P	P	P	(S)	P	P	P	P	P	P	(S)	(A)	P	H	P	(A)	(S)	P	P	P	P	P	P	P	(S)	P	P	P	P	P	25 Days	-do-	3397-00 Paid	
	Daily Total		5	5	5	4	/	5	5	5	5	5	5	/	5	4	5	5	4	5	/	5	4	5	5	5	5	/	5	5	5	5	4	399	G. Total	53619-00 54219	
	Initials of person marking the daily attendance																																				
	Initials of Inspecting Officer																																				

Pay Rs. .... (Rupees ....)

Grand Total of this Muster Roll ... ...

Rs.	P.

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.

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

Total amount paid (in words) Rupees .... Balance Paid

Approval No. 2930/15/Chairman, dt-11-6-07

HEALTH DEPARTMENT

MUSTER ROLL NO. 3745 (From 1-8-07 To 31-8-07) (33) Dailywages S.Ks/L.Bs Cont. Sheet No. 2.

Circle No. X Voucher No. ..... Dated .....

In continuation of Muster Roll No. 3702

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 ... (Days) 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. Shyam Sunder S/o Sh. Ram Charan 102 T. Huts C-107 Kalika Dham B.B.S. Marg N.D-		27 days	133.45	3669=00	Paid
7.	Smt. Kranti w/o Sh. Purotam 49 Block No 7 Lady Harding Complex R.K. Road N.D-		27 days	-do-	3669=00	Paid
8.	Sh. Mukesh S/o Sh. Kanshi Ram S-35 Mali Square Gole Market N.D-		27 days	-do-	3669=00	Paid
9.	Sh. Vijay Kr S/o Sh. Mahinder Singh 10/3 Trilock Puri N.D-		27 days	-do-	3669=00	Paid
10.	Sh. Anil Kr S/o Sh. Rajinder Kr 45-154 School Block Mandawali N.D-		26 days	-do-	3533=00	Paid
		Daily Total	269	G. Total	36554=00	
		Initials of person marking the daily attendance				
		Initials of Inspecting Officer				

Pay Rs. ..... (Rupees .....)

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.

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.

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

HEALTH DEPARTMENT

MUSTER ROLL NO. 3745 (From 1-8-07 To 31-8-07)

(33) Dailywager S.Ks/L.Bs
Only Seven sheets (1+6=7)

Circle No. X Voucher No. .... Dated. ....

In continuation of Muster Roll No. 3702

Accountant (HG), CHIEF MEDICAL OFFICER

PART-NOMINAL-ROLL

Dates From .... To ....

S.No.	Name, Father's/Husband's Name & Address grouped according to classes	Designation	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.	Rate P.	Amount Rs.	Amount P.	Sign. or thumb impression of payee and dated initials of paying officer made at the time of payment
1.	Sh. Mukesh Kr S/o Sh. Ram Khillari 42/503 R.K. Road N.D.		P	P	P	P	S	P	P	P	P	P	P	S	P	P	P/H	P	P	P	S	P	P	P	P	P	P	S	P	P	P	P	P	27 days	133.45 + C.A 661/- pm		3669=00		Paid [signature]
2.	Sh. Dinesh S/o Sh. Ram Kishan E/6 Kalika Dham Gole Market N.D.		P	P	P	P	S	P	P	P	P	P	P	S	P	P	P/H	P	P	P	S	P	P	P	P	P	P	S	P	P	P	P	P	27 days	-do-		3669-		Paid [signature]
3.	Sh. Naresh Kr S/o Sh. Lalchari Lal B-856 Mangal Puri N.D.		P	P	P	P	S	P	P	P	P	P	P	S	P	P	P/H	P	P	P	S	P	P	P	P	P	P	S	P	P	P	P	P	27 days	-do-		3669-00		Paid [thumb impression] [signature]
4.	Sh. Sunil Kr S/o Sh. Ram Kataria 854 Gaubagh R.K. Ashram Marg N.D.		P	P	P	P	S	P	P	P	P	P	P	S	P	P	P/H	P	P	P	S	P	P	P	P	P	P	S	P	P	P	P	P	27	-do-		3669=00		Paid [signature]
5.	Smt. Sunita W/o Sh. Raj Kumar H.No-202 Balmiki Sadan Mandir Marg N.D.		P	P	P	P	S	P	P	P	P	P	P	S	P	P	P/H	P	P	P	S	P	P	P	P	P	P	S	P	P	P	P	P	27 days	-do-		3669-00		Paid सुनीता [signature]
	Daily Total		5	5	5	5	/	5	5	5	5	5	5	/	5	5	5	5	5	5	/	5	5	5	5	5	5	/	5	5	5	5	5	135	G. Total		17745-00 / 18345		
	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 ... ...

Rs.	P.

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

Total amount paid (in words) Rupees .... Balance Paid