30 30 7080900 3/0

Confirm Contingent Bill

Disbursement Type*	Cash	Bill Type*	Petty Cash
Reference Number for Cash Branch	30309070800061		
Fund *	NDMC Municipal General Fund	Bill Date*	14/09/2007
Segment*	GENERAL FUND	Sub Segment*	CASH IN H/
Field*	PUBLIC HEALTH ACCOUNTS BRANCH	Sub Field*	(PUBLIC HE
Functionary*	NDMC		
Sanction By*	MOH	Sanctioned On *	6/07/2007
Sanction Details	Sanction by Chairperson dated 11.6.2007 vide o.o. . NO. D/542/PA/MOH DT. 06/07/2007		
Created By	ajay.mathur	Verified By	rakesh.batt
Confirmed By		Approved By	
Final Approved By		Bill Status	VERIFIED
Narration	PAYMENT OF 18 daily wages AMG CIRCLE NO. VII & VIII @ Rs.133.45 per day + Rs.66 C		
Remarks			

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

Deductions

Account Code	Account Head

Deductions	
Net Payable	
Net Payable in words	Sixty Two Thou

*- Mandatory Fields

Back Submit Close

C.O.Mun.D/542/PA/M.O.H, dt- 6.7.07

HEALTH DEPARTMENT

MUSTER ROLL NO. 3754 (From 1-8-07 To 31-8-07)

(19) Sailyagar A.M.G. @ 133.45/- + OA. Cont. Award No. 4.

Circle No. VII & VIII (Mal) Voucher No. 67/H Dated 18/9/07

In continuation of Muster Roll No. 3716

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
16.	विनोद S/o श्री फकीर चन्द मो०नं०-158 बाल्मीक सदन मंदीर मार्ग नई दिल्ली-1	A.M.G. ~~T.M.R.~~ DWW	P P P S P P P P P S P P H P P P S P P P P P S P P P P P	25		Rs 3035.00 Rs 3669	
17.	सुरेश कुमार S/o श्री रघुवीर D-73A कृष्णा पार्क ढेवली रोड नई दिल्ली-62	A.M.G. ~~T.M.R.~~ DWW	P A P P S A P A P P P S P P H A A A S A A A A A S A A A A A	10 day		Rs 1359.00	
18.	राजेन्द्र S/o श्री परम सुख 19/62 दरीबा कुरी नई दिल्ली-62	A.M.G. ~~T.M.R.~~ DWW	P A P P S P A A A A A S P P H P P P S P P P P A P S A P P P	18 day		Rs 2446.00	
	Pay to Staff Rs 62509 B/F Rs Nil S/A Rs 62509			460 day		G. Total Rs 62509.00	

All sig have been obtained in fully Paid Bills

Daily Total

Initials of person marking the daily attendance

Initials of Inspecting Officer

Pay Rs. 62509/- (Rupees Sixty two thousand five hundred nine only)

CANCELLED Rs. ... Paid 19/9/07 (N. K. GOEL) AO (Pay)

Accountant (HG) 17.9.07 (M. G. MISHRA) AAO (Public Health) N.D.M.C., Palika Kendra

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

VERIFIED FOR CASH/CHEQUE PAYMENT

Section 10/9/07 Ledger No. 8 Serial No 158 AO(HQ)

O.O. No. D/542/PA/M.O.H, dt. 6.7.07

HEALTH DEPARTMENT

MUSTER ROLL NO. 3754 (From 1-8-07 To 31-8-07)

(19) Sailyuger A.M.G., @ 133.45/- + C.A. Cond. Ahead Nurs.

Circle No. VII & VIII Voucher No. ..... Dated .....

In continuation of Muster Roll No. 3716

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 ... 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.	सूबेदार S/o राम निवाज मकान नं० - 888 वार्ड नं० 8 महरौली सराय नई दिल्ली-30	A.M.G. ~~I.M.R.~~	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 day	Rs	Rs 3669.00	Subedar
12.	अशोक वर्धन S/o श्री सुरेश कुमार F-1/11 मार्केट दक्षिणपुरी नई दिल्ली - 62	A.M.G. ~~I.M.R.~~	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 day	Rs	3669.00	Ashok Vardhan
13.	संजय S/o श्री धान सिंह 1/17 डी०डी०ए० फ्लैट डिस्ट ऑफ कैलाश नईदिल्ली-65	A.M.G. ~~I.M.R.~~	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 day	Rs	3669.00	Sanjay
14.	सतराम S/o श्री साहबदीन सी आर - 205 ललीता पार्क लक्ष्मी नगर नई दिल्ली - 92	A.M.G. ~~I.M.R.~~	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 day	Rs	3669.00	Satram
15.	अम्बीका S/o राजनाथ सिंह F-9 बी०के० दत्त कालोनी नई दिल्ली - 03	A.M.G. ~~I.M.R.~~	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 day	Rs	3669.00	Ambika
	Daily Total		15		15		5	15		15	15		15	5	15		15	15	15		5	15		15	15	15		5	15	15	15		15	405 day	G. Total	Rs 55,035.00	
	Initials of person marking the daily attendance		NEJ	NEJ	NEJ	NEJ	S	NEJ	NEJ	NEJ	NEJ	NEJ	NEJ	S	NEJ	NEJ	NEJ	NEJ	NEJ	NEJ	S	NEJ	NEJ	NEJ	NEJ	NEJ	NEJ	S	NEJ	NEJ	NEJ	NEJ	NEJ				
	Initials of Inspecting Officer						S							S							S							S									

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

O.O.No.D/542/PA/M.O.H, dt - 6.7.07

HEALTH DEPARTMENT

MUSTER ROLL NO. 3454 (From 1-8-07 To 31-8-07) (19) Daily wager A.M.G. @ 133.45/+C.A. Cont. sheets No. 2.

Circle No. VII & VIII (Mal) Voucher No. ..... Dated .....

In continuation of Muster Roll No. 3716

PART-NOMINAL-ROLL

Accountant (HG) CHIEF MEDICAL OFFICER

S.No.	Name, Father's/Husband's Name & Address grouped accrding 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.	देवेन्द्र कुमार S/o श्री श्रवणलाल J-368 करतार नगर गली न० -13 नई दिल्ली-53	A.M.G.	P	P	P	P	S	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		Rs 3669.00	3669.00 देवेन्द्र कुमार
7.	घनश्याम S/o श्री मंगल दास B-59 गणेश नगर कम्पलेक्स पांडव नगर गली न०-9 नई दिल्ली-92	A.M.G. T.M.R. "	P	P	P	P	S	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		Rs 3669.00	3669.00 घनश्याम
8.	राजेन्द्र कुमार S/o श्री जगप्रसाद G-87 वेस्ट विनोद नगर नई दिल्ली-92	A.M.G. T.M.R. "	P	P	P	P	S	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		Rs 3669.00	3669.00 राजेन्द्र कुमार
9.	सुरेश कुमार S/o श्री मुरलीधर F-3/140 गली न०-1 संगम बिहार नई दिल्ली-62	A.M.G. T.M.R. "	P	P	P	P	S	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		Rs 3669.00	3669.00 सुरेश कुमार
10.	रवीन्द्र कुमार S/o जयपाल सिंह A-132 ज्वाला पुरी कैम्प न०4 पश्चिम बिहार नई दिल्ली-87	A.M.G. T.M.R. "	P	P	P	P	S	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		Rs 3669.00	3669.00 Ravinder Kumar
	Daily Total		10	10	10	10	S	10	10	10	10	10	S	10	10	10	10	10	10	S	10	10	10	10	10	10	S	10	10	10	10	10		270 days	G. Total	Rs 36,690.00	
	Initials of person marking the daily attendance		NZ	NZ	NZ	NZ	S	NZ	NZ	NZ	NZ	NZ	S	NZ	NZ	NZ	NZ	NZ	NZ	S	NZ	NZ	NZ	NZ	NZ	NZ	S	NZ	NZ	NZ	NZ	NZ					
	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.

	Rs.	P.
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		

G.O.No.D/542/PA/M.O.H., dt- 6-7-07

HEALTH DEPARTMENT

MUSTER ROLL NO. 3754 (From 1-8-07 To 31-8-07)

(19) Daily wager A.M.G. (@ 133.45 + C.A.) Only Four Sheets (1+3=4)

Circle No. VII & VIII (Mal) Voucher No. ..... Dated .....

In continuation of Muster Roll No. 3716

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.	लालता प्रसाद S/o श्री नौबत सिंह B-1159 संगम विहार नई दिल्ली-110062	A.M.G. ~~I.M.R.~~ AWW	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	133.45 + CA	Rs 3669.00	लालता प्रसाद
2.	गोपाल S/o श्री पूरन Q-11 श्री निवास पुरी प्राईवेट कलोनी नई दिल्ली-65	A.M.G. ~~I.M.R.~~	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	"	Rs 3669.00	Gopal
3.	सुनील S/o श्री राजेन्द्र प्रसाद म०नं० 39 जी० पोन्ट काली बाड़ी मार्ग नई दिल्ली-01	A.M.G. ~~I.M.R.~~	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	"	Rs 3669.00	सुनील
4.	राजेन्द्र प्रसाद S/o श्री रामनाथ कोठी नं० 10 लोदी स्टेट नई दिल्ली-03	A.M.G. ~~I.M.R.~~	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	"	Rs 3669.00	राजेन्द्र प्रसाद
5.	राजीव S/o श्री धूम सिंह म०नं०-97 वार्ड नं०-2 महरौली नई दिल्ली-30	A.M.G. ~~I.M.R.~~	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	"	Rs 3669.00	राजीव
	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	5	5	5	5	135	G. Total	Rs 18,345.00	
	Initials of person marking the daily attendance		NS	NS	NS	NS	S	NS	NS	NS	NS	NS	NS	S	NS	NS	NS	NS	NS	NS	S	NS	NS	NS	NS	NS	NS	S	NS	NS	NS	NS	NS				
	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 ... ... Rs. P.

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

Total amount paid (in words)