

MUSTER ROLL NO.

(From 1-12-07 To 31-12-07)

(2)

Voucher No. 1301 Dated 12/28/08
 Continuation of Muster Roll No. A-M.R.-8.12

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 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 | | | | | |
| 66 | Gopal & Dev Ram 7/463. Tileran Delh | | 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 | 13245 | 3216 | <i>[Signature]</i> |
| 67 | Suresh Perkhil 820 Tairid. | | 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 | 3216 | 3216 | <i>[Signature]</i> | |
| 68 | 2- Balmitkheti Mehadi | | 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 | 3216 | 3216 | <i>[Signature]</i> | |
| <p>Prof. S. K. R. B. 132</p> <p>Initials of person making the daily attendance: <i>CD</i></p> <p>Initials of Inspecting Officer: <i>[Signature]</i></p> | | | <p><i>[Large X mark]</i></p> | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | 48 | G. Total | 6532 | 6438 | <i>[Signature]</i> |

Pay Rs. 6438 (Rupees) Six thousand four hundred and thirty eight

Accountant (HG) *[Signature]*

M.O.H. *[Signature]*

CANCELLED
Sr. A.P. *[Signature]*

Sanitation Officer *[Signature]*

Chief Sanitation Inspector *[Signature]*

Sanitation Inspector *[Signature]*

Asst. Sanitation Inspector *[Signature]*

Grand Total of this Muster Roll ...

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

Total amount paid (in words) Rupees 6532 and fully paid 6438

Balance Paid 90

Rs. P.

HEALTH DEPARTMENT

MUSTER ROLL NO.

(From 1-12-07 To 31-12-07)

(1)

File No. ~~XAN~~ Voucher No.

Continuation of Muster Roll No. R.M.R. S.H.

Dated:

30/2030 red words

Accountant (HG)

CHIEF MEDICAL OFFICER

Sign, or thumb impression of paying officer made at the time of payment

| 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 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 | | | | |
| 1985 ✓ | Karan K. Umesh Singh CONT EMP 001969 1234, S.O.H.I.I.T-2602 | — | — | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | Nil | — | 30/2030 red words |
| 1986 ✓ | Phool Singh S. Shivdhar | — | — | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | Nil | — | |
| 1991 ✓ | Vinod K. Mali Ram | — | — | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | Nil | — | |
| 1992 ✓ | Mahim Singh B. Bhanu | — | — | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | Nil | — | |
| 1985 ✓ | Mem Chand K. Bheek | — | — | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | Nil | — | |
| Daily Total | | | | | | | | | | | | | Initials of person marking the daily attendance | | | | | | | | | | | | | | | | | | | Initials of Inspecting Officer | | | | | |
| Pay Rs. (Rupees) | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |

Accountant (HG)
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.

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

| | |
|-----|----|
| Rs. | P. |
|-----|----|