HEALTH DEPARTMENT

MUSTER ROLL NO. ~~3962~~ 3990 (From 01/01/08 To 31/01/08)

Only one sheet

Circle No. IV Voucher No. 68/H 19/3/08 Dated

In continuation of Muster Roll No. 3946

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
1.	Sh. Karam Bir S/o Sh. Man Singh Add-: Extra 30 Trilok Puri Delhi-110091	D/W S.K	P P P