

Contingent Bill Number : 30303070800091**Disbursement Type:** Cash**Bill Type:** Contingency**Fund:** NDMC Municipal General Fund**Bill Date:** 18-Mar-2008**Segment:** GENERAL FUND**Sub Segment:** CASH IN HAND**Field:** PUBLIC HEALTH ACCOUNTS BRANCH**Sub Field:** PUBLIC HEALTH ACCOUNTS BRANCH**Functionary:** NDMC**Payable To:****Sanction By:** Chairman**Sanctioned On:** 01-Nov-2007**SanctionDetails:** Sanctioned By Chairman NDMC vide No. 6797/PS/CH dated 01/11/2007**Bill Status:** CREATED**Narration:** Payment of 24 daily wages SKs/LBs Circle No. 6 @ 133.45 plus CA Rs.66/-**Remarks:**

Code	Payable To	Function	Account Code	Account Head	Amount
		Public Health	3202027	MECH.OF GARBAGE REMOVAL	71612
Gross Amount					71612

Deductions:

Code	Payable To	Function	Account Code	Account Head	Amount
Total Deduction					0
Net Amount					71612

Net Payable in Words :

Created By	dharam.pal	Verified By	
Confirmed By		Approved By	
Final Approved By			

HEALTH DEPARTMENT

Conver Sheet-IV

MUSTER ROLL NO. 3970-3998

3970-3998

(From 01/01/08)

To 31/01/08

Circle No. V Voucher No. 3970-3998 Dated 31/01/08

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.....																															Rate P.	Amount Rs.	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				
21	Rekhs M/Ravi Kes N.C.R.I. Camp N-10-98 Typeset Harnawinds Nag Delhi	SH. SK.	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	P	P	P
22	Maenos K/Sr. Saraswati D-20 Sakurim Delhi	do	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	P	P	P
23	Jai Deep Sasi Jaisiki Debal Pas B54 Sani Path Hauzpur	do	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	P	P	P
24	Deepak S/Sri Anand Singh Sect 20/5/82 Rohini Delle	do	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	P	P	P
Pay Rs 71612 Pay Rs 71612 (Rupees) Initials of Inspecting Officer: S P K Daily Total: 5920 (G. Total)																																				71612	

Accountant (HG) [Signature] M.O.H. Sr. A.O 19/1/08

Released for Payment

Grant 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.	

MUSTER ROLL NO.

HEALTH DEPARTMENT

3770 3998

(From

01/01/08

To

31/01/08

3962

Circle No. VI Voucher No.

Dated

In continuation of Muster Roll No.

PART-NOMINAL-ROLL

S.No.	Name, Father's/Husband's Name & Address grouped according to classes	Designation	Dates From To																															Rate	Amount P. Rs.	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					
11 Sr. Ag.	Sachin S. S. Somwar Sidi 183thofan S.A. Sidi Mudli nyan m.	Officer W.	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	P	P	P	21600
12 Sr. Ag.	Harsh S. S. Kani Mehar Harsh S. S. Kani Mehar	do	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	P	P	2700	
13 Sr. Ag.	NaVen Kargi S. Karkar Sidi P-4/144 Sultou Bari Ag.	do	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	P	P	2200	
14 Sr. Ag.	Neeraj S. S. Karmore Sidi Village Navadga. Rohani	do	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	P	P	2300	
15 Sr. Ag.	Anik S. Mangal Sidi M-101 M-II Narayan Ag.	do	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	P	P	2200	
Daily Total																																					30900	
Initials of person marking the daily attendance			S																																			
Initials of Inspecting Officer			S																																			

Pay Rs. (Rupees)

Accountant (HG)

M.O.H.

Sr. A.O

Grand Total of this Muster Roll

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

Rs. P.

Accountant (HG)

CHIEF MEDICAL OFFICER

Sign. or thumb impression

