HEALTH DEPARTMENT

MUSTER ROLL NO. ~~3971~~ 3999. (From 01/01/08 To 31/01/08)

Only one Sheet.

Circle No. VII Voucher No. 85/H Dated

In continuation of Muster Roll No. 3913 19/3/08

Accountant (HG) CHIEF MEDICAL OFFICER

PART-NOMINAL-ROLL

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	Sh. Sonu S/o Sh. Raj Kumar R/o K-76 J-J-Comp Tigri New Delhi 62	DW SC	S S S