HEALTH DEPARTMENT

(16) daily wages [illegible] L/B

MUSTER ROLL NO. 4005 (For 1/1/08 To 31/01/08)

(1+2) Total sheets 3.

Circle No. XIV Voucher No. 43/4 19/3/08. Dated

In continuation of Muster Roll No. 3919

PART-NOMINAL-ROLL

Accountant (HG), CHIEF MEDICAL OFFICER

S.No.	Name, Father's/Husband's Name & Address grouped according to classes	Designation	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.	Rate P.	Amount Rs.	Amount P.	Sign. or thumb impression of payee and dated initials of paying officer made at the time of payment
12	Sikender S/o Chand Mohan, 2-Bhagwan Nagar New Delhi		P	P	P	P	P	S	P	P	P	P	P	P	S	P	P	P	P	P	P	S	P	P	P	P	P	H	S	P	P	P	P	27 days	133.05 (tea)		3669		[illegible] Attested [illegible]
13	Ajmer Singh S/o Rattan Singh, L-1/20 Dakshinpuri Delhi-62		P	P	P	P	P	S	P	P	P	P	P	P	S	P	P	P	P	P	P	S	P	P	P	P	P	H	S	P	P	P	P	27 days			3669		(thumb impression) Attested [illegible]
14	Dharam Singh S/o Partap, 18/7 Trilokpuri Delhi		P	P	P	P	P	S	P	P	P	P	P	P	S	P	P	P	P	P	P	S	P	P	P	P	P	H	S	P	P	P	P	27 days			3669		[illegible] Attested [illegible]
15	Naveen Kumar S/o Ramcoorde, 2/10 Chiragh Delhi		A	A	A	A	A	A	A	A	A	A	A	A	A	A	A	A	A	A	A	A	A	A	A	A	A	A	A	A	A	A	A	NIL					
16	Nathu Ram S/o Ganga Ram, D-30 Dakshinpuri Delhi		P	P	P	P	P	S	P	P	P	P	P	P	S	P	P	P	P	P	P	S	P	P	P	P	P	H	S	P	P	P	P	~~27~~ 27			3669		[illegible] Attested [illegible]
	Daily Total							S							S							S						H	S					~~970~~ 3697		G. Total	~~50278.00~~ 53947.00		
	Initials of person marking the daily attendance																																						
	Initials of Inspecting Officer																																						

Pay Rs. 53947 (Rupees Fifty three thousand nine hundred forty seven only)

VERIFIED FOR CASH/CHEQUE PAYMENT
Head Cashier

Received on 7/2/08 @10.30 AM. entered in page no. 18 general no. 415

SO(HG)

Accountant (HG) 18.3.08

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.

CANCELLED
Released for Payment 19/3/08

Grand Toal of this Muster Roll ... ...

Rs.	P.

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

All signature [illegible] attested and fully paid.

Total amount paid (in words) Rupees .... Balance Paid

HEALTH DEPARTMENT

MUSTER ROLL NO. ~~3977~~ 4005 (From 01/01/08 To 31/01/08)

Contd Sheet – II

Circle No. XIV Voucher No. ..... Dated .....

In continuation of Muster Roll No. 3919

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 ... 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
7	Geeta W/o Arun Kumar Kishan Jhuggi No 345 Sector 20 Rohini Delhi			27 days	13345 + CA	3669	गीता
8	Mahesh S/o Kalu Ram 23 Palikdhe New Delhi			27 days	"	3669	[illegible]
9	Vikky S/o Babulal 320 Pertal Bagh Delhi			26 days	"	3533	[illegible]
10	Manish Kumar S/o Rajender Kumar 10 Janpat N Delhi			26 days	"	3533	Manish
11	Manoj S/o Shyamlal Chandra 4/10 Cheragdeli New Delhi 62			25 days	"	3397	[illegible]
	Daily Total			289	G. Total	3927/00	
	Initials of person marking the daily attendance						
	Initials of Inspecting Officer						

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 ... ...

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

Total amount paid (in words) Rupees ..... Balance Paid

Rs.	P.

HEALTH DEPARTMENT

MUSTER ROLL NO. ~~3977~~ 4005 (From 01/01/08 To 31/01/08)

Circle No. XIV Voucher No. ..... Dated .....

In continuation of Muster Roll No. 3919

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 ... (1–31)	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	Sanjai S/o Randhir Singh 3 Pkl de New Delhi		P P P P P S P P P P P P S P P P P P S P P P P P H S P P P P	27 days	133.45 + CA	3669	Attested A.K.
2	Ajay Kumar S/o Sukh Pal T-336 Phase Ekarol Bagh Delhi		P A P P P S A P P P P P S P P P P P S P P P P P H S P P P P	25 days	"	3397	Attested A.K.
3	Madanlal S/o Vinod Kumar 4039 Ajinagar Galin 16 Del		A P P P A S P P P P P P S P P P P P S P P P P P H S P P P P	25 days	"	3397	Attested A.K.
4	Sammi S/o Suraj Bhan K-294 Durgapuri Shadra Delhi		P P P P P S P P P P P P S P P P P P S P P P P P H S P P P P	27 days	"	3669	Attested A.K.
5	Sanjeev S/o Harichand E/D/260 Madangiri New Delhi		P P P P P S P P P P P P S P P P P P S P P P P P H S P P P P	27 days	"	3669	Attested A.K.
6	Manju W/o Ram Kumar Vill Wazirabad Galin 5 Post Burari Delhi		P P P P P S P P P P P P S P P P P P S P P P P P H S P P P P	27 days	"	3669	Attested A.K.
	Daily Total		5 10 15 20	158	G. Total	21470.10	
	Initials of person marking the daily attendance						
	Initials of Inspecting Officer						

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 ... ...

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

Total amount paid (in words) Rupees.....Balance Paid

Rs.	P.