

HEALTH DEPARTMENT

MUSTER ROLL NO.

Circle No. VII Voucher No. 4016 (From 01/02/08 To 29/02/08)
 In continuation of Muster Roll No. 3969 Dated

PART-NOMINAL-ROLL

S.No.	Name, Father's/Husband's Name & Address grouped according to classes	Designation	Dates From..... To.....																															Rate Rs. 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			
5	Sh. Narendar Kumar S/o Ved P.O. Dr. Ambedkar Nagar N. Delhi	D/10 S.R.	[Handwritten marks]																															13.45	3402.00	(5)
6	Smt. Art. Lata Sh. Manoj Kumar M. T-297 Doka Birpurj New Delhi	-do-	[Handwritten marks]																															13.45	3402.00	(6)
7	Smt. Rajni Bala Lata Sh. Krishan Lal M. 7/481 Block 7 Toloekpurj New Delhi	-do-	[Handwritten marks]																															13.45	3402.00	(7)
8	Smt. Sumita Lata Sh. Jogpal M. T-297 Doka Birpurj New Delhi	-do-	[Handwritten marks]																															13.45	3402.00	(8)
Daily Total																																			19849.00	
Initials of person marking the daily attendance																																			26944.00	
Initials of Inspecting Officer																																				

Pay Rs. (Rupees)

Accountant (HG)

CHIEF MEDICAL OFFICER

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

Rs. P.

Total amount paid (in words) Rupees

