O.O. No — D/136/PH/NDM dt 14/2/08

Approval Charina No-6798/D/PS dt 1/11/07

HEALTH DEPARTMENT

MUSTER ROLL NO. 4065 (From 15/2/08 To 29/2/08)

Only one Sheet.

Circle No. XII Voucher No. Dated

In continuation of Muster Roll No. Fresh. 936/H/31/3/08

PART-NOMINAL-ROLL

Accountant (HG), CHIEF MEDICAL OFFICER

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 40	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. Pardeep S/o Babulal H.N. 1889 Pulenji Kotala Mubarik Pur N. Delhi	Sfr.	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