76 35

Contingent Bill Number : 30304080900060

Disbursement Type: Cash
Bill Type: ImprestBills
Fund: NDMC Municipal General Fund
Bill Date: 15-Apr-2008
Segment: GENERAL FUND
Sub Segment: CASH IN HAND
Field: PUBLIC HEALTH ACCOUNTS BRANCH
Sub Field: (PUBLIC HEALTH) SANITATION CIRCLE 3
Functionary: NDMC
Payable To:
Sanction By: Chairman
Sanctioned On: 20-Nov-2007
SanctionDetails: Sanctioned By Chairman NDMC vide No. 7426/PS/CH dated 20/11/2007
Bill Status: CREATED
Narration: Payment of 35 daily wages SKs/LBs Circle No. 3 @ 133.45 plus CA Rs.66/-
Remarks:

Code	Payable To	Function	Account Code	Account Head	Amount
		Public Health	3202027	MECH.OF GARBAGE REMOVAL	59840
			Gross Amount		59840

Deductions:

a

Code	Payable To	Function	Account Code	Account Head	Amount
			Total Deduction		0
			Net Amount		59840

Net Payable in Words :

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

Approval Chairman No-7426/D/PS dt. 20/11/07.
Vide. O.O.N - 1226/PA/MOH dt. 20/12/07.

(35)

HEALTH DEPARTMENT

Contd Sheet-VI

MUSTER ROLL NO. ~~4082~~ 4083 (From 01/03/08 To 15/03/08)

Circle No. III Voucher No. 76/H Dated

In continuation of Muster Roll No. 4012. 23/4/08

Accountant (HG), CHIEF MEDICAL OFFICER

PART-NOMINAL-ROLL

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
35	Vijay S/o Dharam Singh 140/107 Madl Town opp Thana Mubarakbad Delhi	S.K	P	D	P	P	P	P	P	P	D	P	P	P	P	P	P																	13 days	133-45 + CH	1768=00	VIJAY
			34		33	33	33	32	32	32		32	32	34	34	34	34																	427 days		58072=00	
	Daily Total		35	X	34	34	34	33	33	33	X	33	33	35	35	35	34																	440 days	G. Total	59840=00 only.	
	Initials of person marking the daily attendance		A	A	A	A	A	A	A	A	A	A	A	A	A	A	A																				
	Initials of Inspecting Officer			Y							X																										

Pay this bill Rs 59840/-
B/FRNDM
GRN 59840

Pay Rs. 59840/= (Rupees Rs Fifty nine thousand eight hundred forty only)

Accountant (HG) 16.4.08

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.

CANCELLED
Sr. A.O. (V. K. GOEL)
Released for A.O. (HG)

M.R. bill passed subject to recording of complete residential address of persons at sl no 3, 7 to 12, 16, 18, 24, 28, 31 & 34 before making payment to them.

Grand Total of this Muster Roll ... ... Rs. P.

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

Total amount paid (in words) Rupees

Balance Paid

HEALTH DEPARTMENT

MUSTER ROLL NO. ~~4082~~ 4083 (From 01/03/08 To 15/03/08)

Contd. sheet-II

Circle No. III Voucher No. ..... Dated .....

In continuation of Muster Roll No. 4082

PART-NOMINAL-ROLL

Accountant (HG) — CHIEF MEDICAL OFFICER

Dates From ..... To .....

S.No.	Name, Father's/Husband's Name & Address grouped acccrding to classes	Designation	1 28	2	3 28	4 28	5 28	6 27	7 27	8 27	9	10 27	11 26	12 28	13 28	14 28	15 28	16	17	18	19	20	21	22	23	24	25	26	27	28	29	30	31	Total 357 days	Rate Rs. P.	Amount Rs. P.	Sign. or thumb impression of payee and dated initials of paying officer made at the time of payment
29	Madan Lal s/o Sh. Kamal House no 805 Ajmeri Gate Delhi	S.K	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 P P	P P P P	P P P P	P P																	13 days	133-45 +ch	18552=00 1768=00 Pay	Madan
30	Ashwini s/o Sh. Rajkumar H.No- 16/248 Tilak Pusi Delhi-	"	P P P	E	A	A	A	A	A	A	A	A	P P P	P P P	P P P	P P P	P																	0.5 days	do	680=00 Pay	Ashwini
31	Sandeep s/o Sh. Paley Patel Nagar/Baljeet Nagar T-2561	"	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 P P P	P P P P	P P P P																		13 days	do	1768=00	संदीप
32	Vinod s/o Sh. Rajender 96-L Babarkhak Sirimandi N.D.	"	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 P P P	P P P P	P P P P																		13 days	do	1768=00	
33	Ram Niwas s/o Sh. Mitthan 4/264 Dasiampur Delhi	"	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 P P P	P P P P	P P P P																		13 days	do	1768=00	Ram Niwas
34	Nitin s/o Sh. Ishwar Manager H. Bank P.K Road	"	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 P P P	P P P P	P P P P																		13 days	do	1768=00	Nitin
	Daily Total		34	X	33	33	33	32	32	32	X	32	32	34	34	34																		427 days	Total	58072=00	
	Initials of person marking the daily attendance			X							X																										
	Initials of Inspecting Officer			X							X																										

Pay Rs. ..... (Rupees .....

Grand this Muster Roll ... ...

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.

Deduint made, as per details transferred to Register of Unpaid Wages

Rs.	P.

HEALTH DEPARTMENT

MUSTER ROLL NO. ~~4082~~ 4083 (From 01/03/08 To 15/03/08)

Contd sheet IV

Circle No. III Voucher No. ..... Dated .....

In continuation of Muster Roll No. 4012

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 23	2 X	3 23	4 23	5 23	6 23	7 22	8 23	9 X	10 23	11 23	12 23	13 23	14 23	15 23	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
24	Smt. Nirmala w/o Sh. Jagdish village/Post Develi Khan pur Delhi	Daily Wages S.K.	P	S	P	P	P	P	P	P	S	P	P	P	P	P	P																		13 days	133-45 + CA	1768-00	Sig Attested
25	Smt. Sunita w/o Sh. Devender 14/129 Darsan pura Delhi-	— do —	P	S	P	P	P	A	P	A	S	A	P	P	P	P	P																		10 days	do	1360-00	Sig Attested
26	Smt. Varsha w/o Sh. Rakesh N.D.M.C. ~~Staff~~ Quarters Palika Dham Delhi	— do —	P	S	P	P	P	P	P	P	S	P	P	P	P	P	P																		13 days	do	1768-00	Sig Attested
27	Smt. Maya w/o Sh. Balkishan Harijan Basti Mandir Marg New Delhi-1	— do —	P	S	P	P	P	P	P	P	S	P	P	P	P	P	P																		13 days	do	1768-00	Sig Attested
28	Smt. Geeta w/o Sh. Manoj Kumar A-154 Shakar pur Delhi-	— do —	P	S	P	P	P	P	P	P	S	P	P	P	P	P	P																		13 days	do	1768-00	Sig Attested
	Daily Total		28	X	28	28	28	27	27	27	X	27	28	28	28	28	28																		357 days	G. Total	48552-00	
	Initials of person marking the daily attendance		A	S	A	A	A	A	A	A	S	A	A	A	A	A	A																					
	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

Rs.	P.

HEALTH DEPARTMENT

MUSTER ROLL NO. ~~4082~~ 4083 (From 01/03/08 To 15/3/08)

Contersheet-III

Circle No. III Voucher No. ..... Dated .....

In continuation of Muster Roll No. 4012.

PART-NOMINAL-ROLL

Accountant (HG) CHIEF MEDICAL OFFICER

S.No.	Name, Father's/Husband's Name & Address grouped accrding to classes	Designation	Dates From ... To ... 1/17	2/17	3/17	4/17	5/17	6/17	7/17	8/17	9/17	10/17	11/17	12/17	13/17	14/17	15/17	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
18	Sh. Kisan Pal S/o Sh. Som Pal Tirlok puri Delhi-91	Daily Wages S.K.	P	S	P	P	P	P	A	P	S	P	P	P	P	P	P									16								12 days 2200 days	133-45 +CH	1632=00	Sd/ Attested
19	Sh. Vishal S/o Sh. Raj Kumar 5/18 Gajju Katra Shadra Ghee Mandi Delhi-	- do -	P	S	P	P	P	P	P	P	S	P	P	P	P	P	P									16								13 days	do	1768=00	Sd/ Attested
20	Sh. Jaginder S/o Sh. Pirbhu Dayal H.No-16C-WC Lodhi Road Main Market Delhi	- do -	P	S	P	P	P	P	P	P	S	P	P	P	P	P	P									16								13 days	do	1768=00	Sd/ Attested
21	Sh. Vikash Ujjanwal S/o Sh. Om Prakash X 2157 A Raghuwa Shadhra Delhi-	- do -	P	S	P	P	P	P	P	P	S	P	A	P	P	P	P									16								12 days	do	1632=00	Sd/ Attested
22	Smt. Usha W/o Sh. Ravinder B-579 Meet Nagar Nand Nagari	- do -	P	S	P	P	P	P	P	P	S	P	P	P	P	P	P									16								13 days	do	1768=00	Sd/ Attested
23	Sh. Sunny S/o Sh. Suresh House No-K-487 Gali No-7 Gotami vihar Delhi.	- do -	P	S	P	P	P	P	P	P	S	P	A	P	P	P	P									16								12 days	do	1632=00	Sd/ Attested
	Daily Total		23	X	23	23	23	23	22	23	X	23	21	23	23	23	23																	295 days	Total	40120=00	
	Initials of person marking the daily attendance		S	S	S	S	S	S	S	S	S	S	S	S	S	S	S																				
	Initials of Inspecting Officer			X							X																										

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

Rs.	P.

O.O. No. 1226/D/PA/MOH dt. 20/12/07

HEALTH DEPARTMENT

MUSTER ROLL NO. ~~4082~~ 4083 (From 01/03/08 To 15/3/08)

Cont-sheet-II

Circle No. III Voucher No. ..... Dated .....

In continuation of Muster Roll No. 4082.

PART-NOMINAL-ROLL

Accountant (HG) CHIEF MEDICAL OFFICER

S.No.	Name, Father's/Husband's Name & Address grouped accccrding to classes	Designation	Dates From ..... To 1/12	2	3/12	4/12	5/12	6/12	7/12	8/12	9	10/12	11/12	12/12	13/12	14/12	15/12	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
13	Smt. Santosh w/o Sh. Vijay Singh S/70/89 Vijay Camp J.J. Camp Jalvihar Jajpat Nagar	Daily Wages S.K.	P	S	P	P	P	P	P	S	P	P	P	P	P	P	P								16									13 days	133-45 + CA	1768=00	Sd/- Sd/- Sd/- Attested
14	Smt. Babey w/o Sh. Ram Niwas 4/264 Dasirnpuri	- do -	P	S	P	P	P	P	P	S	P	P	P	P	P	P	P																	13 days	do	1768=00	Sd/- Attested
15	Smt. Geeta w/o Sh. Mohan Singh H-7 Palika Dham Gabb Quarter N.D.M.C.	- do -	P	S	P	P	P	P	P	S	P	P	P	P	P	P	P								16									13 days	do	1768=00	Sd/- Sd/- Sd/- Attested
16	Smt. Prem Wati w/o Sh. Bijender Palika Dham New Delhi	- do -	P	S	P	P	P	P	P	S		P	P	P	P	P	P								16									13 days	do	1768=00	Sd/- Sd/- Sd/- Attested
17	Sh. Dinesh Kumar S/o Sh. Babu Lal. H. No-262 Gali No-07 Shiv Mandir Wazirbad Delhi-54	"	P	S	P	P	P	P	P	S	S	P	P	P	P	P	P																	12 days	do	1632=00	Sd/- Sd/- Sd/- Attested
		Daily Total	17	X	17	17	17	17	17	17	X	16	17	17	17	17	17																	220 days	G. Total	29920=00	
		Initials of person marking the daily attendance		S							S																										
		Initials of Inspecting Officer									X																										

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 ... ... Rs. P.

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

O-O-No- 1226/D/PA/MOH dt 20/12/07.

(35) Clerk wages S/K, C/B @ 133.45 FCA

(1)

HEALTH DEPARTMENT

MUSTER ROLL NO. ~~4082~~ 4083 (From 01/03/08 To 15/03/08)

(46) Total Sheet = 7.

Circle No. III Voucher No. ..... Dated .....

In continuation of Muster Roll No. 4012.

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-	Neeta w/o Sh. Inder Valmiki Basti, Mandir Marg.	Daily Wage S/K	P P P S P P P P P S P

HEALTH DEPARTMENT

MUSTER ROLL NO. 4082 (From 01/03/08 To 15/3/08)

Cover Sheet - I

Circle No. III Voucher No. ..... Dated .....

In continuation of Muster Roll No. 4082

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
1	Dolly w/o Sh. Gulal Quam No 162 Mandir Marg B. Basti P.K Road N.D.	Daily Wages S/K	P	S	P	P	P	P	P	S		P	P	P	P	P	P									16								13 days	135-45 +CA	1768=00	Dolly Sy Attested B DSL
2	Vikash S/o Dharm Singh 44/1 Moti Bagh Village New Delhi	"	P	S	P	P	P	P	P	S		P	P	P	P	P	P									16								13 days	do	1768=00	Vikash Sy Attested B DSL
3	Dheeraj S/o Mahar Chand Harijan Basti P.K Road Marg New Delhi	"	P	S	P	P	P	P	P	S		P	P	P	P	P	P									16								13 days	do	1768=00	Sy Attested B DSL
4	Rajesh S/o Rajendra H.No Balmiki Basti P.K Rd N.D.	"	P	S	P	P	P	P	P	S		P	P	P	P	P	P									16								13 days	do	1768=00	Sy Attested B DSL
5	Rajni W/o Budh Ram D12 Ama Peswa Road Udyan Marg	"	P	S	P	P	P	P	P	S		P	P	P	P	P	P									16								13 days	do	1768=00	Sy Attested B DSL
6	Shakuntla W/o Shri Kishan J-4/60A DDA flats Kalkaji ND-19	"	P	S	P	P	P	P	P	S		P	P	P	P	P	P									16								13 days	do	1768=00	Sy Attested B DSL
		Daily Total	6	S	6	6	6	6	6	S		6	6	6	6	6	6																	78 days	G. Total	10608=00	
		Initials of person marking the daily attendance		S						S																											
		Initials of Inspecting Officer		S						S																											

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

Rs.	P.