Chairman approval NO- 7426/D/PS dt 20/11/07
D-O NO- 1226/D/PA/MOH dt 20/12/07

HEALTH DEPARTMENT

MUSTER ROLL NO. 4084 (From 01/03/08 To 15/03/08)

Cover Sheet-IV

Circle No. IV Voucher No. 73/H Dated

In continuation of Muster Roll No. 4013 ~~23~~ 1/4/08

PART-NOMINAL-ROLL

Accountant (HG) 30328-00 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	Rate Rs. P.	Amount Rs. P.	Sign/or thumb impression of payee and dated initials of paying officer made at the time of payment
21	Sh. Deepu S/o Sh Rajender K-332, Dakshin Puri N.D- 62	D/W Sk	P P A A A A P P P P P P P P P P P P P P 16 8	133.45 +66-00	1068-00	
22	Sh- Ajay Kumar S/o Sh Jagdish Kumar 1845, J Block Jahangirpuri Delhi	"	P P P P P P P P P P P P P P P 16 13	"	1768-00	
23	Smt Mamta D/o Sh. Hari Lal. 17/D/s Ali Ganj Lodhi Road N.D.	"	P P P P P P P P P P P P P A A 16 14	"	1496-00	
24	~~Smt Rama W/o Ra Kumar~~ ~~Sh Ram Charan~~ Sh. Prem Dass S/o Ram Charan C-23 Palika Dham N.D	"	P P P P P P P P P P P A A 16 11	"	1496-00	
25	Smt Rama W/o Raj Kumar Kali Bari T. J. Camp N. Delhi	"	P P P P P P P P P P P P P 16 13	"	1768-00	
26.	Smt Sheila W/o Hari Krishan B. 12/23 Tirlokpuri Delhi	"	P P P P P P P P P P P P P 16 13	"	1768-00	
		Daily Total	S Sick Sick Sick Sick Sick S Sick Sick Sick Sick Sick		293 G. Total	39712-00
		Initials of person marking the daily attendance				
		Initials of Inspecting Officer				

09/4/08 received on 9/4/08 at 11-30 Am. entry in page no. 22 serial no. 584

PAID CASH/CHEQUE PAYMENT

Pay Rs. 39712/- (Rupees Thirty Nine Thousand Seven Hundred Twelve only)

Accountant (HG)

M.O.H.

CANCELLED Sr. A.O. Released for Payment

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

Contd. Sheet-III

MUSTER ROLL NO. 4084. (From 01/03/08 To 15/03/08)

Circle No. IV Voucher No. Dated

In continuation of Muster Roll No. 4013

PART-NOMINAL-ROLL

Accountant (HG) 22440-00 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	Rate Rs. P.	Amount Rs. P.	Sign. or thumb impression of payee and dated initials of paying officer made at the time of payment
16	Sh. Yogender Kr S/o Sh. Sripal Singh 29/2-62 Himmat Puri Delhi-91.	D/Wsp	P P P P P P P P P P P P P P	13	133-45 +66-00	1768-00	
17	Sh. Munim S/o Sh Meel. F-488, Baljeet Nagar N. Delhi-08		P P P P P P P P P P P P P P	7	11	952-00	
18	Smt Kailash wati W/o Sh mangal. Nome complex Mamelin marg N.D	11	P P P P P P P P P P P P P P	13	11	1768-00	
19	Sh. Anil Kumar S/o Sh. Banarsi Dass. B-A/100, DDA Flats Najafgarh Road N.D.	11	P P P P P P P P P P P P P P	13	11	1768-00	
20	Sh. Arun Kumar S/o Sh. Ratan Lal. B-82, DDA Flats East of Kailash Delhi N.D	11	P P P P P P P P P P P P P P	12	11	1632-00	
	Daily Total			223	G. Total	30328-00	
	Initials of person marking the daily attendance		Read S Read Read Read Read Read S Read Read Read Read Read				
	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

Contract sheet-II

MUSTER ROLL NO. 4084 (From 01/03/08 To 15/03/08)

Circle No. IV Voucher No. .... Dated ....

In continuation of Muster Roll No. 4013.

PART-NOMINAL-ROLL

Accountant (HG), 14144-00 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 (104)	Rate Rs. P.	Amount Rs. P.	Sign. or thumb impression of payee and dated initials of paying officer made at the time of payment
11.	Sh. Avinash S/o Sh Budhi Ram, S-16, Prithvi Raj Lane, Khan Market, N-Delhi	D/w 'Sk'	P	S	P	P	P	P	P	P	S	P	P	P	A	P	P																	12	133.45 +66.00	1632-00	Sig Altered, Paid
12.	Sh. Vipin Kr. S/o Sh Kishan Pal, 380, Chirag Delhi	"	P	S	P	P	P	P	P	P	D	P	P	P	P	P	P																	13	"	1768-00	Sig Altered, Paid
13.	Sh. Deepak S/o Sh Mahender, 17/309, Trilok Puri, Delhi-91	"	P	S	P	P	P	P	P	P	S	P	P	P	P	P	P																	13	"	1768-00	Sig Altered, Paid
14.	Sh. Vicky S/o Sh Ram Kishan, 15 D/5, Ali Ganj m/s, N. Delhi	"	P	S	P	P	P	P	P	P	S	A	P	P	P	P	P																	12	"	1632-00	Sig Altered, Paid
15.	Sh. Amarjeet S/o Sh Ramesh Chand, L-625, Sewa Nagar, N.D. 03	"	P	S	P	P	P	P	P	A	S	A	P	P	P	P	P																	11	"	1496-00	Sig Altered & Paid
	Daily Total																																	165	G. Total	22440-00	
	Initials of person marking the daily attendance		[initials]	S	[initials]	[initials]	[initials]	[initials]	[initials]	[initials]	S	[initials]	[initials]	[initials]	[initials]	[initials]	[initials]																				
	Initials of Inspecting Officer			[initials]																																	

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

Grand Total of this Muster Roll ... ...

Rs.	P.

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.

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. 4084 (From 01/03/08 To 15/03/08)

Contd Sheet - I

Circle No. IV Voucher No. ..... Dated .....

In continuation of Muster Roll No. 4013

PART-NOMINAL-ROLL

Accountant (HG) 7616-00 CHIEF MEDICAL OFFICER

S.No.	Name, Father's/Husband's Name & Address grouped according to classes	Designation	Dates From ... To ...	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
06	Sh. Mukesh S/o Sh. Chandi Lal 12 - Yamuna Vihar Priyashani Colony Delhi 06	Dlw Sy.	16	9	133.45 +66-00	1224-00	Sig Attd Paid
07	Sh. Sanjeev S/o Sh Puran T-101, Dhareda Village - Delhi	"	16	13	"	1768-00	Sig Attd Paid
08	Sh. Sandeep S/o Sh Surender Kumar. F-1 Palika Dham	"	16	11	"	1496-00	Sig Attd Paid
09	Sh. Bhupender Sood S/o Sh Vijay Sood. 462, Bhola Nath Nagar Shahdra Delhi	"	16	02	"	272-00	Sig Attd Paid
10	Sh. Rajender S/o Sh Hariehand Y-1139, Mangol Puri Delhi-83,	"	16	13	"	1768-00	Sig Attd Paid
	Daily Total			104	G. Total	14144-00	
	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.

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

HEALTH DEPARTMENT

(26) daily wages S/K, C/B @ 133.45 ECA

MUSTER ROLL NO. 4084 (From 01/03/08 To 15/03/08)

(1+4) Total sheet = 5

Circle No. IV Voucher No. ..... Dated .....

In continuation of Muster Roll No. 4013.

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 ...	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
01	Sh. Rakesh Kumar S/o Sh. Ratan Lal. 22, Staff Quarter mother Taresa Road N.D.	D/w SK.	16	10	133.45 +66-00	1360-00	Sign Attested Paid
02	Sh. Rajeev Kr. S/o Sh. Jaydish A-71, Shastri Nagar Delhi-	"	16	13	"	1768-00	Sign Attested
03	Sh. Chandraprakash S/o Sh. Rajender F-15, Palika Dham N.D. 01	"	16	10	"	1360-00	Sign Attested Paid
04	Sh. Dharminder Kr S/o Sh. Kanahiya Lal. A-25, Ram Park. Delhi-	"	16	13	"	1768-00	Sign Attested Paid
05	Sh. Manish S/o Sh. Mukesh. 5-Gandhi Sadan N. Delhi.	"	16	10	"	1360-00	Sign Attested Paid
	Daily Total			56	G. Total	7616-00	
	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

Rs.	P.