HEALTH DEPARTMENT

MUSTER ROLL NO. 4085 (From 1/03/08 To 15/03/08)

Circle No. V Voucher No. 13/H Dated 15/March/08

In continuation of Muster Roll No. 4014

Cover sheet-III

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	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. Vijender S/o Sh Rajjan Singh Add. H.No. 157. Sahibabad U.P.	D/w. Sk	13 days	-	1760-00 1768	
17.	Sh. Ramkishan S/o Sh Sohanpal Add. H.No. 593. Aligarj Lodhi Colony N.D	Sk	13 days	-	1760-00 1768	
18.	Sh. Narender S/o Sh Khemchand Add. H.No. 61. Harijan Basti N.D	Sk	13 days	-	1760-00 1768	
19.	Smt Kanta W/o Sh Palu Ram Add H.No 70. Gandhi Sadan Mandir marg N.D	Sk	13 days	-	1760-00 1768	
20.	Sh. Raju S/o Sh. Chunni Lal Add. H.No. G.7. Basheri Raj Road N.D	Sk	08 days	-	1088-00	
		Daily Total	232 days	G. Total	31560-00	
		Initials of person marking the daily attendance				
		Initials of Inspecting Officer				

Received on 10/4/08 at 11-20 A.M. entry at the page No 22 Serial No. 541

11/4/08

Pay Rs. 31552/- (Rupees Rs Thirty one thousand five hundred Fifty two only)

SNO 1 to 20 Sk

Accountant (HG) 9/4/08

M.O.H.

CANCELLED Asstt. Accounts Officer (Pay) (N.K. GOEL) AC (Pay)

Grand Total of this Muster Roll ... Fully Paid ...

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

VERIFIED FOR CASH/CHEQUE PAYMENT

H-128 S1 - 2/4/08

Rs.	P.

HEALTH DEPARTMENT

Cover Sheet-II

MUSTER ROLL NO. 4085 (From 1/03/08 To 15/03/08)

Circle No. V Voucher No. Dated.

In continuation of Muster Roll No. 4014

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 120 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
11.	Sh: Mony s/o Sardare Add. H.No - 31, Gala Khan. Block. B. Okhla. N.D	D/W. Sk	P P P P P P P P P P P P P P P	10 days	-	1360-00	
12.	Smt. Poonamma w/o Ram Pal Add. Jhuggi No - 126. Tokia, Kale Khan Mirjan Lane N.D	— " —	P P P P P P P P P P P P P P P	13 days	-	1768-00	
13	Sh. Parveen s/o Mannen Add. H.No - D-17. Kidwai Nagar. N.D	— " —	P P P A A A A A A A A A A A P	05 days	-	680-00	
14.	Sh. Varun s/o Jagdev. Add. H.No 190, Pusp Vihar M.B. Road. N.D	— " —	P P P P P P P P P P P P P P P	13 days	-	1768-00 1360-00	
15.	Sh. Pradeep Kr s/o Rajsingh Add. H No - B-6. Amar Colony. Rishi Nagar Delhi. 4.	— " —	A A P P A P P P P P P P P P P	11 days	-	1496-00	
	Daily Total		13 0 14 15 12 14 12 11 0 13 15 14 14 12 13	172 days	G. Total	23400-00	
	Initials of person marking the daily attendance		P 0 P P P P P P 0 P P P P P				
	Initials of Inspecting Officer		P 0 P 0 P 0 P 0 P				

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. 4085 (From 1/3/08 To 15/03/08)

Circle No. V Voucher No. Dated

In continuation of Muster Roll No. 4014.

Cover-sheet-I

Accountant (HG)

CHIEF MEDICAL OFFICER

PART-NOMINAL-ROLL

Dates From To

S.No.	Name, Father's/Husband's Name & Address grouped acccrding to classes	Designation	1 5	2 5	3 5	4 5	5 5	6 5	7 5	8 5	9 5	10 5	11 5	12 5	13 5	14 5	15 5	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
6.	Sh. Satyam Sarran S/o Sh. Dinesh Kr Saran Add - L-373 Pahar Ganj N.D.	D/W. SK	P	(S)	P	P	P	P	(S)	(S)	(S)	P	P	P	P	P	(S)	→															10 days	-	1360-00	
7.	Smt Kanta W/o Sh. Rakesh Add. H.No - A-270 M.C.D. Flat Usman Pur Shashtri Parkash	— do —	P	(S)	P	P	P	P	P	P	(S)	P	P	P	P	P	P	→															13 days	-	1768-00	ID-140
8.	Sh. Vikash S/o Sh. Suresh Add. H.No. 4017. Gali No-7 Gautam Vihar Delhi-53	— do —	P	(S)	P	P	P	P	P	P	(S)	P	P	P	P	P	P	→															13 days	-	1768-00	
9.	Sh. Akash S/o Sh. Prakash Chand Add. B.3. Palika dham Gate No 1 N.D-1	— do —	P	(S)	P	P	P	P	P	(A)	(S)	P	P	P	P	(A)	(A)	→																10 days	-	1360-00	ID-140
10.	Smt. Veena W/o Sh. Mahesh Add. H.No. 3249 School wali Gali Pahar Ganj, N.D.	— do —	(A)	(S)	(A)	P	P	P	P	(A)	(S)	(A)	P	P	P	P	P	→																09 days	-	1224-00	
	Daily Total		9	(S)	9	10	10	10	9	7	(S)	9	10	10	10	9	8	→															120 days	G. Total	16320-00	
	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.

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

(20) daily wager Sk, C/B @ 133-4 to 4

HEALTH DEPARTMENT

MUSTER ROLL NO. 4085 (From 01/03/08 To 15/03/08)

(143) Total sheet = 4.

Circle No. V Voucher No. ..... Dated .....

In continuation of Muster Roll No. 4014

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	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	Smt. Kamlesh w/o Sh Ajeet Add. H.No-304, Shahpur Jat N. Delhi-49	Daily Wager Sk	P P P (S) P P P P P (S) P P P P P P 16 → 13 days		1768-00	Kamlesh 8/3/08
2	Smt. Neetu w/o Sh Lalit Add - H.No-5, Gandhi sadan Mandir Marg N.D	-do-	P P P (S) P P P P P (S) P P P P P P 16 → 13 days	-	1768-00	Neetu 8/3/08
3	Sh. Anil Kr S/o Sh Sumersh Add. H.No A/167 Sarkar Pur S.S. Colony N.D. 34.	-do-	P P P (S) P P P P P (S) P P P P P P 16 → 13 days	-	1768-00	Anil Kumar 8/3/08
4	Smt. Asha W/o Sh Ramdayal Add. H.No-51. Harijan Basti N.D	-do-	P P P (S) P P P P P (S) P P P P P P 16 → 13 days	-	1768-00	3/12/11 8/3/08
5	Smt. Asha W/o Sh Ramkishan Add. H.No. 148 Harijan Basti N.D	-do-	P P P (S) P P P P P (S) P P P P P P 16 → 13 day	-	1768-00	3/12/11 8/3/08
	Daily Total		5 (S) 5 5 5 5 5 5 (S) 5 5 5 5 5 5 → 65 days	G. Total	8840-00	
	Initials of person marking the daily attendance					
	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.