83

Contingent Bill Number : 30304080900081

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 6
Functionary: NDMC
Payable To:
Sanction By: Chairman
Sanctioned On: 16-Jan-2008
SanctionDetails: Sanctioned By Chairman NDMC vide No. 462/PS/CH dated 16/01/2008
Bill Status: CREATED
Narration: Payment of 16 daily wages SKs/LBs Circle No. 6 @ 133.45 plus CA Rs.66/-
Remarks:

Code	Payable To	Function	Account Code	Account Head	Amount
		Public Health	3202027	MECH.OF GARBAGE REMOVAL	49232
			Gross Amount		49232

Deductions:

17

Code	Payable To	Function	Account Code	Account Head	Amount
			Total Deduction		0
			Net Amount		49232

Net Payable in Words :

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

O-O No - 162 | PA | Mon Dt 22/2/08

Chairman approval 462/D/PS Dt 16/1/08

(16)

HEALTH DEPARTMENT

Contd. Sheet - II

MUSTER ROLL NO. 4113. (From 01/03/08 To 31/03/08)

Circle No. VI Voucher No. 83/H 23/4/08 Dated

In continuation of Muster Roll No. 4073

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
12 Sh.	Bantey S/o Sh. Vikram R/o B-7 Tuglak Lane N.D	Sweeper Sel.		26 days	133-45 + CA	3536	
13 Sh.	Manoj S/o Sh. Jugani R/o K-3 Pankaj Vihar N.D	do		NIL			
14 Sh.	Amit Kr S/o Sh. Raj Pal R/o B-1/107 Sarvodaya Jyanti Vihar Delhi	do		25 days		3400	
15 Sh.	Prince S/o Sh. Ram vir R/o B-67 New Seema Puri Delhi	do		26 days		3536	
16 Sh.	Rajeer S/o Sh. Mahesh Ram V/S Sh. Naveen S/o Sh. Raj Singh R/o 158 Model Tadak Puri N.D	do		13 days		1768	
			Daily Total	362 ~~3630~~	G. Total	~~49396~~ 49232	
			Initials of person marking the daily attendance				
			Initials of Inspecting Officer				

Pay Rs. 49232/- (Rupees Forty Nine thousand two hundred thirty two only)

Received on 01/04/08 at 2.20 pm entry No page no 23 serial No 55

Sr. SO(HG)

Payment to staff Rs 49232 B 1 TR 1112 SBI 49232

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.

CANCELLED (V. K. GOEL) AO (PH)

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

Roll Blue Subject to recording complete residential address before Payment to them

All Sig. LTI & RTI are

HEALTH DEPARTMENT

Control-Sheet-I

MUSTER ROLL NO. 4113 (From 01/03/08 To 31/03/08)

Circle No. VI Voucher No. ..... Dated .....

In continuation of Muster Roll No. 4073

Accountant (HG) CHIEF MEDICAL OFFICER

PART-NOMINAL-ROLL

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
7	Sh. Karam Singh S/o Sh. Chander Bhan R/o 1/67 Delhi Cantt N Dl	do		26 days	133.45 T CN	3536-00	
8	Sh. Shyam Singh S/o Atter Singh R/o 1076 Gali No. 3 Dharampura Dl	do		24 days	11	3264-00 3123	
9	Sh. Mukesh Kr S/o Sh. Banarsi Das R/o	do		25 days	4	3400-00	
10	Sh. Naresh Kr S/o Sh. Balram Singh R/o K/225 Kali Badi N Dl-1	do		24 days	1	3264-00	
11	Sh. Amarjit S/o Sh. Hari Ram R/o	do		26 days	4	3564-00 3536	
				275		36992	
	Daily Total			2730	Total	37156-00	
	Initials of person marking the daily attendance						
	Initials of Inspecting Officer						

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

O.O.No – 162/D/PA/MOH Dt. 22/02/08

(16) daily wager Sik, C/B@

HEALTH DEPARTMENT

MUSTER ROLL NO. 4113 (From 01/03/08 To 31/3/08)

(1+2) Total sheet = 3.

Circle No. VI Voucher No. ..... Dated .....

In continuation of Muster Roll No. 4073

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	Smt Rekha w/o Sh. Kamal Singh R/o Tri Nagar Delhi	D/wager Sik		26 days	133.45 + CA	3536-00	
2	Sh. Manoj Kr S/o Sh. Kailash Chand A/736 Gali No 8 Shahdara Delhi	do		18 days	4	2448-00	
3	Sh. Kaldeep S/o Sh. Banwari Lal H No 20 Harijan Basti ND	do		26	4	3536-00	
4	Sh. Pawan S/o Sh. Sat Pal H No L-30 Dashim Puri ND	do		26	1	3536-00	
5	Sh. Rahul S/o Sh. Kishan R/o 107 Mot indot Puri N.D.	do		26 days	4	3536-00	
6	Sh. Rajesh Kr S/o Sh. Banarsi Dass R/o X/3882 Shanti Mohalla Gali No 8 Gandhi Nagar Delhi	do		26 days	4	3536-00	
	Daily Total			148 days	G. Total	20128-00	
	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 ... ... Rs. P.

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