

Contingent Bill Number : 30304080900052

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 12
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 8 daily wages SKs/LBs Circle No. 12 @ 133.45 plus CA Rs.66/-

Remarks:

Code	Payable To	Function	Account Code	Account Head	Amount
		Public Health	3202027	MECH.OF GARBAGE REMOVAL	27064
Gross Amount					27064

Deductions:

Code	Payable To	Function	Account Code	Account Head	Amount
Total Deduction					0
Net Amount					27064

Net Payable in Words :

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

G.O. No- 162/D/ MCH/ PA 22/02/08

vide approval Memo no- 462/D/PS/ 16/01/08

HEALTH DEPARTMENT

MUSTER ROLL NO. 4119

Circle No. XII Voucher No. 931H
In continuation of Muster Roll No. 4097-23/4/08 Dated 23/4/08

(From 1/03/08 To 31/03/08)

Copy Sheet-I

PART-NOMINAL-ROLL

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 impressions of payee and dated initials of paying officer made at the time of payment	
			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					
5	Sh. Silve RAS S/o Sh. Muthu 278 D.D.A Flat Saranmi Tigarai N Delhi 82.	S/O	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	26 days	4144	3536	[Signature]
6	Sh. Ravi Kumar S/o Sh. Kalu Ram A-16 Palika Sham Goad Market New Delhi 11001		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	26 days	3536	3536	[Signature]
7	Smt Suman W/o Sh. Subash F-114 Sakshampuri New Delhi 82.		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	26 days	3536	3536	[Signature]	
8	Sh. Raj Kumar S/o Smt Savitri Devi Add- N-35 D.N.T. Sector VIcel per nager N.D.C. Dharammender S/O Rajendra A II/885 sultampur Delhi-85		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	26 days	952	1360	[Signature]	
9			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	27 days	2706	2706	[Signature]	
G. Total																																						

Pay Rs. 27064/- (Rupees) [Handwritten]

Accountant (HG) [Signature]

Grand Total of this Muster Roll ...

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

Pay to slip No 27064 [Handwritten]

Chancellor A. K. GOEL AO (PH) [Signature]

Chief Medical Officer [Signature]

Register of Unpaid Wages [Handwritten]

