

O.O No-142 | D/P Month 22/02/08
 HEALTH DEPARTMENT
 Contd. Sheet 5.

MUSTER ROLL NO. 4156
 (From 1/4/08 To 30/4/08)

Circle No. VII Voucher No. 4114 Dated 2/5/08
 In continuation of Muster-Roll No. 4114
PART-NOMINAL-ROLL
 Accountant (HG) *[Signature]*
 Sr. A.D. *[Signature]* **MEDICAL OFFICER**

S.No.	Name, Father's/Husband's Name & Address grouped according to classes	Designation	Dates From...		To		Rate		Amount		Sign. or thumb impression 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	Total
37	Smt Sumitran Devi Narasimhan K/o B/S Tailak Puri Delhi-91	P/00 S.K	22/02/08		22/02/08		13345		214		<i>[Signature]</i> 25/4/08																								

S.No.	Name, Father's/Husband's Name & Address grouped according to classes	Designation	Daily Total	Initials of Inspecting Officer	Dates From...		To		Rate	Amount	Sign. or thumb impression 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
	<i>[Handwritten Name]</i>				22/02/08		22/02/08																										

Pay Rs. 92296/- (Rupees Ninety Two Thousand Ninety Six only)
 Accountant (HG) *[Signature]* 61598
 M.O.H. Sr. A.D. *[Signature]*
CA/Accountant
 Deduct-Payment made, as per details transferred to Register of Unpaid Wages
 Grand Total of this Muster Roll ...
 Rs. P.
 Received *[Signature]* N.K. GOPI
 To Rs. 92296/- by cash/bank ...

HEALTH DEPARTMENT

MUSTER ROLL NO.

4156

(From

1/4/08

To

30/4/08

Contn. Sheet-IV

Circle No. VII Voucher No. 4114

Dated

In continuation of Muster Roll No.

PART-NOMINAL-ROLL

S.No.	Name, Father's/Husband's Name & Address grouped according to classes	Designation	Dates From																															Daily Total	Initials of person marking the daily attendance	Initials of Inspecting Officer					
			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								
22	Sh. Nitin Bheel S/o Sh. Amar Singh R/o- 31/380 Prem Nagar New Delhi - 3	D/O 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	26	13345	3536.00	FAFA	
23	Sh. Parmod Kumar S/o Sh. Mangal Ram R/o- A-3/231 Kamal New Delhi	-do-	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	26	-do-	3536.00	Part	
24	Sh. Sandeep Singh S/o Sh. Bheender R/o- D-199 Katuria Sarai New Delhi	-do-	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	26	-do-	3536.00	Part		
25	Sh. Ataraj S/o Sh. Sumar Singh R/o H.N.D-69 Balanika Sadan Mandy Marg New Delhi	-do-	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	26	-do-	3536.00	Part		
26	Sh. Anita S/o Sh. Santoy R/o- 2574 Mangal Park	-do-	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	26	-do-	3536.00	Part		
																																							662245	90032.00	

Accountant (HG) Sr. A.O. CHIEF MEDICAL OFFICER

CP

Pay Rs. (Rupees)

M.O.H.

Sr. A.O.

Grand Total of this Muster Roll ...

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

Rs.

P.

Certified that the workers mentioned in the muster roll were actually employed by me on NDMC works(s) and they were actually paid on my identification in my presence.

HEALTH DEPARTMENT MUSTER ROLL NO. 4156 (From 1/4/08 To 30/4/08)

Circle No. VII Voucher No. 4114 Dated 1/4/08 to 30/4/08

In continuation of Muster Roll No. 4114

PART-NOMINAL-ROLL

S.No.	Name, Father's/Husband's Name & Address grouped according to classes	Designation	Dates From: _____ To: _____																															Rate P. Rs.	Amount P. Rs.	Sign. or thumb impression of payee and dated initials of paying officer made at the time of payment			
			Daily Total																																				
			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						
17	Sh. Tarun s/o Sh. Kam Krishan R/o- 114 Badli's Sadaam mandli Murg New Delhi	D/co S-t	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	153.45	2720.00	Handwritten signature		
18	Sh. Vicky s/o Sh. Visondar R/o. House No 1640/S3/3MB Ext N. Delhi 41	-do-	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	2536.00	Handwritten signature			
19	Sh. Vicky s/o Sh. Madan Gobal R/o- 3A 04 Block manganbari Delhi	-do-	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	2536.00	Handwritten signature			
20	Sh. Rajesh kumar s/o Sh. Kam Kumar R/o- Village R Post Halambi kula Delhi	-do-	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	3536.00	Handwritten signature				
21	Sh. Avun s/o Sh. Om Karkash R/o- K-306 Dakshinpur New Delhi	-do-	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	3536.00	Handwritten signature				
Pay Rs. <u>(Rupees)</u>		Initials of person marking the daily attendance	5	5	5	5	5	5	5	5	5	5	5	5	5	5	5	5	5	5	5	5	5	5	5	5	5	5	5	5	5	5	5	5320.00			72352.00		

Accountant (HG), Handwritten Signature
JEF MEDICAL OFFICER

Center Sheet-III

Accountant (HG) M.O.H. Sr. A.O. Grand Total of this Muster Roll ...
 Certified that the workers mentioned in the muster roll were actually employed by me on NDMC works(s) and they were actually paid on my identification in my presence.
 Deduct-Payment made, as per details transferred to Register of Unpaid Wages
 Rs. P.

HEALTH DEPARTMENT

MUSTER ROLL NO. 4156

(From 1/4/08

To 30/4/08)

Conty Sheet-1

Circle No. VII Voucher No. 4114

Dated

In continuation of Muster Roll No. 4114

PART-NOMINAL-ROLL

Accountant (HG)

17680 CHIEF MEDICAL OFFICER

S.No.	Name, Father's/Husband's Name & Address grouped according to classes	Designation	Dates From To																															Total	Rate	Amount	Sign. or thumb impression 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						
6	Sh. Vijay Kumar S/o Sh. Brijesh K... R/o S-12/10 Indraprastha, Connaught Place, New Delhi	D/O SK	/	/	/	/	/	/	/	/	/	/	/	/	/	/	/	/	/	/	/	/	/	/	/	/	/	/	/	/	/	/	/	/	26	123-45 Rs. P.F.	3536.00	3536.00 Paid	[Signature]
7	Smt Kamla s/o Sh. Sundar Kumar R/o T-II/56 Madan Park New Delhi	-do-	/	/	/	/	/	/	/	/	/	/	/	/	/	/	/	/	/	/	/	/	/	/	/	/	/	/	/	/	/	/	/	26	-do-	2992.00	2992.00 Paid	[Signature]	
8	Smt Neeraj s/o Sh. Kamal Kumar R/o-34 Parka Garden, Saraswati Nagar New Delhi	-do-	/	/	/	/	/	/	/	/	/	/	/	/	/	/	/	/	/	/	/	/	/	/	/	/	/	/	/	/	/	/	/	26	-do-	3536.00	3536.00 Paid	[Signature]	
9	Smt Gouda s/o Sh. Ramesh Lal R/o T-81 First Shah Katra, Extension Building, Badli, New Delhi	-do-	/	/	/	/	/	/	/	/	/	/	/	/	/	/	/	/	/	/	/	/	/	/	/	/	/	/	/	/	/	/	26	-do-	3536.00	3536.00 Paid	[Signature]		
10	Sr. Nitish S/o Sh. Lakshman R/o-VINO-63, Bahaduri Bazar, Mandir Marg, New Delhi	-do-	/	/	/	/	/	/	/	/	/	/	/	/	/	/	/	/	/	/	/	/	/	/	/	/	/	/	/	/	/	/	26	-do-	2992.00	2992.00 Paid	[Signature]		
Daily Total			/																															130					
Initials of person marking the daily attendance			S																																				
Initials of Inspecting Officer			N																																				

Pay Rs. (Rupees)

Accountant (HG)

M.O.H.

Sr. A.O

Grand Total of this Muster Roll ...

Rs. P.

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

Vide approved Chairman No - 462 | D | 15 | 16 | 01 | 08
O.O. No - 162 | D | 14 | met | 22 | 02 | 08

HEALTH DEPARTMENT

(97) Staff Cognel S/R, 1/13 @ 133.48/-
e04.

MUSTER ROLL NO. 4156

(From 01/04/08 To 30/04/08)

(145) to keep sheet = 6

Circle No. VII Voucher No. 4114 Dated 16/01/08

In continuation of Muster Roll No. 4114

PART-NOMINAL-ROLL

S.No.	Name, Father's/Husband's Name & Address grouped according to classes	Designation	Dates From To																															Total	Rate per Day Rs.	Amount Paid P.	Sign. or thumb impression 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										
1	Smt. Veero Devi w/o Sh. Delli	D/CD St	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	26 days	2536	2536	(S) 21
2	Smt. Dhano Rani w/o Sh. Tony R/o - Jaganmohi House New Delhi	-do-	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	26 days	2536	2536	(S) 21	
3	Smt. Ajay S/o Sh. Sukh Dayal R/o - T 14 Old Nangal Kalya Delhi cantt New Delhi	-do-	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	26 days	2536	2536	(S) 21	
4	Smt. Raj. Kumari S/o Sh. Khem Chand R/o - Trilok Puri Delhi	-do-	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	26 days	2536	2536	(S) 21	
5	Smt. Manoj Devi w/o Sh. R/o - Trilok Puri Delhi	-do-	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	26 days	2536	2536	(S) 21	
Daily Total																																		130 days		17688							
Initials of person marking the daily attendance																																											
Initials of Inspecting Officer																																											

Accountant (HG)
CHIEF MEDICAL 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.
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