HEALTH DEPARTMENT

MUSTER ROLL NO. 4166 (From 1/4/08 To 30/4/08)

Contd. Sheet-IV

Circle No. IV Voucher No. 58/H 12/5/08 Dated

In continuation of Muster Roll No. 4125

PART-NOMINAL-ROLL

Accountant (HG) To GRF 65688-00 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
21.	Sh. Deepu S/o Sh. Rajendra K-332, Dakshinpuri N. Delhi-62	D/W Sy.		21	137-48 +66-00	2856-00	Deepu Sig Attested
22.	Sh. Ajay Kr S/o Sh. Jagdish Kr., 1846, J Block. Jahangir Puri Delhi	"		26	"	3536-00	Sig Attested Ajay
23.	Smt Mamta W/o Sh. Harlal 17/D/S Ali Enj Radhi Road.	"		26	"	3536-00	Mamta Sig Attested
24.	Sh. Prem Class S/o Sh. Ram Chandra. C-23, Palika Dhara N.D.	"		26	"	3536-00	[illegible] Sig Attested
25.	Smt Rama W/o Sh. Raj Kumar Kali wari. J.J. Colony N. Delhi	"		25	"	3400-00	[illegible] Sig Attested
26.	Smt Sheela W/o Sh. Hari Krishan. B-12/23, Trilok Puri Delhi			26	"	3536-00	[illegible] Sig Attested
	Daily Total			633	G. Total	86088-00	
	Initials of person marking the daily attendance						
	Initials of Inspecting Officer						

Pay to shift the 86088 B/F Rs. 86088

Pay Rs. 86088 (Rupees) Eighty Six thousand Eighty Eight only

Accountant (HG) 8.5.08

M.O.H. Sr. A.O.

CANCELLED (V. K. GOEL) AO (PH) Released for Payment

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

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

Sig Attested & Fully Paid

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.

Received 7/5/08 at 12.55 P.M. Entry No page no 24 serial No 581

HEALTH DEPARTMENT

MUSTER ROLL NO. 4166 (From 1/4/08 To 30/4/08)

Contd. sheet – III

Circle No. IV Voucher No. Dated.

In continuation of Muster Roll No. 4125

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. Yogender Kr. S/o Sh. Gopal Singh 29/262, Himmatwala Delhi-91.	L/M SK	P P P P P S P P P P P P S P P P P P S P P P P P S P P P P P S	26	133.45 +66-00	3536-00	
17.	Sh. Munim S/o Sh. Med. T-488, Baljeet Nagar N. Delhi-08	"	P P P P P S P P P P P P S P P P P P S P P P P P S P P P P P S	26	11	3536-00	
18.	Smt Kailash wati W/o Sh mangal, H.No-207, 207, NDMC complex Mandir Marg N. Delhi	"	P P P P P S P P P P P P S P P P P P S P P P P P S P P P P P S	26 days	11	3536-00	Not to Pay for want of Academy of Complete Identity and see letter dated
19.	Sh Anil Kumar S/o Sh. Ramgopi dass B-A/100 DDA Flats Mayur Enclave N.D.	"	P P P P P S P P P P P P S P P P P P S P P P P P S P P P P P S	26 days	11	3536-00	
20.	Sh Prem Kumar S/o Sh. Ralem Lal B-82, DDA Flats East of Kailash Delhi N-Delhi.	"	P P P P P S P P P P P P S P P P P P S P P P P P S P P P P P S	26 days	11	3536-00	
	Daily Total		S S S S	483	G. Total	65688-00	
	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.

HEALTH DEPARTMENT

Contd. Sheet – II

MUSTER ROLL NO. 4166 (From 1/4/08 To 30/4/08)

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

In continuation of Muster Roll No. 4125

PART-NOMINAL-ROLL

Accountant (HG) Total Rs. 33456-00 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 246	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 Budh Ram 5-16, Prithvi Raj Lane. Khampukt N.D.	D/W Sk.		26	133.45 +66-00	3536-00	Avinash Sign. Attested
12.	Sh. Vipin Kumar S/o Sh Krishan Pal 380, Chiraj Delhi	"		26	"	3536-00	Sig Attested
13.	Sh Deepak S/o Sh Mahender 17/309, Trilok Puri Delhi-91.	"		26	"	3536-00	Sig Attested
14.	Sh. Vicky S/o Sh. Ram Kishan 15-D/5, Ali Ganj Delhi.	"		17 days	"	2312-00	Sig Attested
15.	Sh. Amarjeet S/o Sh. Ramesh Chand. L-625, Sewa Nagar N-Delhi-03	"		12	"	1632	Sig Attested
	Daily Total			353	~~G.~~ Total 4F	48008-00	
	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.

HEALTH DEPARTMENT

Contd. sheet-I

MUSTER ROLL NO. 4166. (From 1/4/08 To 30/4/08)

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

In continuation of Muster Roll No. 4125

Accountant (HG), 17408-00 CHIEF MEDICAL OFFICER

PART-NOMINAL-ROLL

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	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. Chameli Lal, 12, Yamuna Vihar Delhi – Priyadarshani colony.	D/Wo Sty.	○	P	P	○	○	S	P	P	P	P	P	P	S	P	P	P	P	P	P	S	P	P	P	P	P	P	S	○	○	○		20 days	133-45 / 466-00	2720-00	[signature] Sig. Attested
07	Sh. Sanjeev S/o Sh. Puran, T-101, Dhareda village Delhi.	"	P	P	P	P	P	S	P	P	P	P	P	P	S	P	P	P	P	P	P	S	P	P	P	P	P	P	S	○	P	P		25	11	3400-00	Sanjeev; Sig. Attested
08	Sh. Sandeep S/o Sh. Surender Kr. Kumar, F-1, Palika Dham. Delhi.	"	P	P	P	P	P	○	○	P	P	P	P	P	○	○	P	P	P	P	P	S	P	P	P	P	P	P	S	P	○	P		23 days	11	3128-00	[signature]; Sig. Attested
09	Sh. Bhupender Sood S/o Sh. Vijay Sood, 462, Bhola Nath Nagar Shahdra Delhi.	"	P	P	P	P	P	S	P	P	P	P	P	P	S	P	P	P	P	P	P	S	P	P	P	P	P	P	S	P	P	P		26 days	11	3536-00	[signature]; Sig. Attested
10	Sh. Rajender S/o Sh. Hari Chand, Y-1139, Mangolpuri Delhi. 83.	"	P	P	P	P	P	S	P	P	P	P	P	P	S	○	○	P	P	P	P	S	P	P	P	P	P	P	S	P	P	P		24 days	11	3264-00	[signature]; Sig. Attested
	Daily Total							S							S							S							S					246	G. Total c/f	33456-00	
	Initials of person marking the daily attendance		✓	✓	✓	✓	✓	S	✓	✓	✓	✓	✓	✓	S	✓	✓	✓	✓	✓	✓	S	✓	✓	✓	✓	✓	✓	S	✓	✓	✓					
	Initials of Inspecting Officer							S							S							S							S								

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

Vide approval Chairman No- 7426/D/PS Dt. 20/11/07.
O.O.No- 69/CMO/HQ/D Dt 11/3/08

(26) daily wages S/K, L/B @ 133.45 + CA

HEALTH DEPARTMENT

(1+4) Total sheet = 5

MUSTER ROLL NO. 4166 (From 01/4/08 To 30/4/08)

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

In continuation of Muster Roll No. 4125

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 Per Day 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 Quarters Mother Teresa Road.	D/W Sk		25	133.45 + 66.00 Dm.	3400-00	21/4/21
02.	Sh. Rajeev Kr. S/o Sh Jagdish A-71, Shashtri Nagar Delhi.	"		26 days	"	3536-00	रस्तीव
03.	Sh. Chander Prakash S/o Sh Rajender F-15 Palika Dham Delhi.	"		26	"	3536-00	
04.	Sh. Dharminder Kr S/o Sh. Kanahiya Lal. A-25 Rampark Delhi	"		25 days	"	3400-00	13/5/08
05.	Sh. Manish S/o Sh. Mukesh. 5- Gandhi Sadan N. Delhi.	"		26	"	3536-00	मनीष
	Daily Total			128	G. Total	17408-00	
	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