Contingent Bill Number : 30305080900019

Disbursement Type: Cash

Fund: NDMC Municipal General Fund

Segment: GENERAL FUND

Field: PUBLIC HEALTH ACCOUNTS BRANCH

Functionary: NDMC

Sanction By: Chairman

SanctionDetails: Sanctioned By Chairman NDMC vide No. 7426/PS/CH dated 20/11/2007

Narration: Payment of 29 daily wages SKs/LBs Circle No. 9 @ 133.45 plus CA Rs.66/-

Remarks:

Bill Type: ImprestBills

Bill Date: 05-May-2008

Sub Segment: CASH IN HAND

Sub Field: (PUBLIC HEALTH) SANITATION CIRCLE 9

Payable To:

Sanctioned On: 20-Nov-2007

Bill Status: CREATED

Code	Payable To	Function	Account Code	Account Head	Amount
		Public Health	3202027	MECH.OF GARBAGE REMOVAL	94384
			Gross Amount		94384

Deductions:

Code	Payable To	Function	Account Code	Account Head	Amount
			Total Deduction		0
			Net Amount		94384

Net Payable in Words :

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

O.O.M. – 69/CMO/HQ dt 11/3/08
Chairman approval No – 7426/D/PS dt 20/11/07

HEALTH DEPARTMENT

Control sheet-V

MUSTER ROLL NO. 4170 (From 1/4/08 To 30/4/08)

Circle No. XXIII Voucher No. 23/H. Dated 15/5/08

In continuation of Muster Roll No. 4129

Accountant (HG) CHIEF MEDICAL OFFICER

PART-NOMINAL-ROLL

Dates From ..... To .....

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
26	Sh. Pinto Singh S/o Prem Dass 77/46, Mukesh Nagar Sahadra.	Daily wages Sfk.																																19 days	133.45 CA	2584.00	Pinty Singh
27	Sh. Sanjay Kumar S/o Puran S/45, Harijan Basti, Mandir Marg	do																																26 days	"	3536.00	
28	Vinod S/o Sukhbir 17, Mandir Marg, Balmiki Colony, ND.	do																																26 days	"	3536.00	Vinod
29	Smt. Sheela w/o Ram Avtar S/6 P.R. Lane, ND	do																																26 days	"	3536.00	
	Pay to Staff Rs. 94384 B/R R.N.																																				
		Daily Total																																693 694	G. Total	94520.00	Ninety four thousand five hundred twenty only
		Initials of person marking the daily attendance																																			
		Initials of Inspecting Officer																																			

Pay Rs. 94384/- (Rupees Ninety four thousand three hundred Eighty four only)

Accountant (HG)

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.

M.O.H.

Sr. A.O

(V. K. GOEL)
AO (PH)

Grand total of this Muster Roll ... ...

Deduction/Payment made, as per details transferred to Register of Unpaid Wages

Amount paid (in words) Rupees

Rs.	P.

HEALTH DEPARTMENT

MUSTER ROLL NO. 4170 (From 1/4/08 To 30/4/08)

Contd. Sheet IV

Circle No. IX Voucher No. ..... Dated .....

In continuation of Muster Roll No. 4129

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 19, 2 18, 3 19, 4 18, 5 17, 6 S, 7 18, 8 13, 9 19, 10 19, 11 18, 12 18, 13 S, 14 18, 15 18, 16 17, 17 18, 18 18, 19 17, 20 S, 21 17, 22 18, 23 19, 24 20, 25 20, 26 19, 27 S, 28 19, 29 20, 30 20, 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
21.	Smt. Sushma w/o Sh. Sanjay D/S-51, P.R. Lane, N.D.	Daily wages S/K		~~26 days~~ 25		~~3536.00~~ 3400	
22	Sh. Ram Mehar S/o Satbir J 2nd/53 Madan Gir, N.D.	do		26 days		3536.00	Ram Mehar
23	Smt. Sayanti Devi w/o Raghubir 131/184, Rashtrapati Sampda Avas, Kali Bari Marg, N.D.	do		22 days		2992.00	
24	Smt. Vimlesh w/o Beer Singh J 2nd/53, Madan Gir.	do		25 days		3400.00	
25	Sh. Naresh S/o Chaman Lal H.No. 1088, Balmiki Mohalla, Tuglaq Bad N.D.	do		21 days		2856.00	
				597		81192	
	Daily Total		24 22 24 21 20 5 23 18 23 24 23 22 5 23 22 20 23 23 21 5 21 23 24 25 25 24 5 24 25 25	596	G. Total	81328.00	
	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

HEALTH DEPARTMENT

Contest Sheet-III

MUSTER ROLL NO. 4170 (From 1/4/08 To 30/4/08)

Circle No. VIII Voucher No. ..... Dated .....

In continuation of Muster Roll No. 4129

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 ..... (1/4 – 30/4)	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. Ankit & Babli H.No. 31/B/82, Trilok Puri ND	Daily wages S/K		23 dys	"	3128	
17	" Vinit & Babli H.No. 31/B/82, Trilok Puri ND.	do		24 dys	"	3264	
18	" Amit Kumar S/o Amar Singh 2245 Lodhi Colony, ND.	do		23 dys	"	3128	
19	" Devender S/o Madan Lal 4/31 Dakshin Puri, ND.	do		110 dys	"	1496	
20	Smt Rani W/o Sarwan H.No. A/319, Minto Road Complex ND.	do		26 dys	"	3536	
				478			
	Daily Total		19 18 19 18 17 5 18 13 19 19 18 18 5 18 18 17 18 18 17 5 17 18 19 20 20 19 5 19 20 20	4764	G. Total	65008	
	Initials of person marking the daily attendance				40		
	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

HEALTH DEPARTMENT

MUSTER ROLL NO. 4170 (From 1/4/08 To 30/4/08)

Contd Sheet-II

Circle No. VIII Voucher No. ..... Dated .....

In continuation of Muster Roll No. 4129

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 ..... (1/9 … 30/10)	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
11.	Smt. Kamlesh w/o Raju C-22, Palika Dham, N.D.	Daily Wager S/w.		26 dys.	"	3536.00	
12.	Sh. Mam Raj S/o Chander Lal H-14, Palika Dham, N.D.	—do—		26 dys.	"	3536.00	
13	Sh. Arjun S/o Bhagwan Dass V-15, Civil Line, Subroto Park N.D.	—do—		26 dys.	"	3536.00	
14	Sh. Satish S/o Shyam Lal V-II/6, Madan Gir, N.D.	—do—		17 dys.	"	2312.00	
15	Smt. Yogita w/o Pawan Kumar 20/1-C Gole Mkt. Sec-6, Rohtak Road N.D.	—do—		26 dys.	"	3536.00	
	Daily Total		14 14 15 15 14 S 14 14 15 15 14 14 S 14 14 14 14 14 13 S 13 14 14 15 15 14 S 15 15 15	369 dys.	Total up	50456.00	
	Initials of person marking the daily attendance			371	—		
	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

MUSTER ROLL NO. 4170 (From 1/4/08 To 30/4/08)

Cover Sheet-I

Circle No. VIII Voucher No. ..... Dated .....

In continuation of Muster Roll No. 4129

PART-NOMINAL-ROLL

Accountant (HG)

CHIEF MEDICAL OFFICER

S.No.	Name, Father's/Husband's Name & Address grouped accrding 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
6	Sh. Surender Kumar S/o Amar Singh 2245 Lodhi Colony, N.D.	Daily wager SK.	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	"	3536.00	
7.	" Mehar Chand S/o Titli J-10, J.J. Colony, Tigri N.D.	do	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	"	3536.00	
8.	Smt. Mamta w/o Deepak 148 Basant Village, Basant Vihar N.D.	do	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		25	"	3400.00	
9	Sh. Deepak S/o Omkar 17/461, Trilok Puri Delhi	do	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	"	3536.00	
10	Sh. Ashok Kumar S/o Madan Lal MCD Colony H.No. 2, Samey Pur Badli Delhi	do	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	"	3536.00	
		Daily Total	9	9	10	10	10	5	10	10	10	10	9	9	5	9	9	10	10	10	9	5	9	10	9	10	10	9	5	10	10	10		250	G. Total	34000.00	
		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.

	Rs.	P.
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		

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

(29) daily wager S/K, L/B @ 133.45 + CA

HEALTH DEPARTMENT

MUSTER ROLL NO. 4170 (From 1/4/08 To 30/4/08)

(175) Total sheet = 6

Circle No. VIII Voucher No. ..... Dated .....

In continuation of Muster Roll No. 4139.

PART-NOMINAL-ROLL

Accountant (HG) CHIEF MEDICAL OFFICER

S.No.	Name, Father's/Husband's Name & Address grouped accccrding 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 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
1.	Smt. Sham Wati W/o Bal Ram G-5 D/S Ali Ganj, Lodhi Colony	Daily wager 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	26 days	133.45 + CA	3536.00	
2.	Smt. Ritu W/o Sunil Kumar G-5, Ali Ganj Lodhi Colony	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	26 days	do	3536.00	
3	Sh. Lokesh S/o Omparkash S/o Vill Kushak, Hiranki Delhi	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	26 days	do	3536.00	
4	" Manish S/o Rajkumar 134 Tamoor Nagar, P.O. Sirci-Hiras Puri, N.D.	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	17 days	do	2312.00	
5.	" Rahul S/o Dharampal J/A/10866, Sat Ngr., Karol Bagh.	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	26 days	do	3536.00	
		Daily Total	4	4	5	5	5	5	5	5	5	5	4	4	5	5	4	5	5	5	4	5	4	5	4	5	5	4	5	4	5	5	5	12 days	G. Total	16456.00	
		Initials of person marking the daily attendance																																			
		Initials of Inspecting Officer																																			

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