

Contingent Bill Number : 30307080900093

Disbursement Type: Cash
Fund: NDMC Municipal General Fund
Segment: GENERAL FUND
Field: PUBLIC HEALTH ACCOUNTS BRANCH
Functionary: NDMC
Sanction By: Chairman

Bill Type: ImprestBills
Bill Date: 14-Jul-2008
Sub Segment: CASH IN HAND
Sub Field: (PUBLIC HEALTH) ANTI MALARIA SURVEILLANCE ZONE-V
Payable To: Secretary,NDMC
Sanctioned On: 28-Apr-2008

SanctionDetails: Payment of 11 daily wages AMG Circle No. 5 (Malaria) @ 135.25 plus CA Rs.66/- for the month of June 2008
Sanctioned On: 28-Apr-2008
Bill Status: CREATED

Narration: Sanctioned By Chairman NDMC vide No. 3438/PS/CH dated 28/05/2008
Remarks:

Code	Payable To	Function	Account Code	Account Head	Amount
		Public Health	3202011	STG.OF ANTI MALARIA OPERATION	36538
Gross Amount					36538

Deductions:

Code	Payable To	Function	Account Code	Account Head	Amount
Total Deduction					0
Net Amount					36538

Net Payable in Words :

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

HEALTH DEPARTMENT

MUSTER ROLL NO. 4298

4298

1/6/08

30/6/08

Comm. Sreek-2

Circle No. V (Mud) Voucher No. 92/1/1
In continuation of Muster Roll No. 4291

Dated

To

PART-NOMINAL-ROLL

Accountant (HG)

CHIEF MEDICAL OFFICER (HG)

S.No.	Name, Father's/Husband's Name & Address grouped according to classes	Designation	Dates From: 1/6/08 To: 30/6/08																															Total	Rate Rs.	Amount Rs.	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					
7-1	श्रीमती शिव श्याम 81 भाग्य 2 भाग्य भाग्य	Amr D1/15	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	95 days	135.95 + c.A.	3447=00	Sign.
8-1	श्रीमती शिव श्याम 6-1 भाग्य भाग्य भाग्य भाग्य	15	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	95 days	135.95 + c.A.	3447=00	21510/2 Sign.
9-1	श्रीमती शिव श्याम श्रीमती शिव श्याम	15	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	95 days	135.95 + c.A.	3447=00	Sign.
10-1	श्रीमती शिव श्याम श्रीमती शिव श्याम	15	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	95 days	135.95 + c.A.	3447=00	Sign.
11-1	श्रीमती शिव श्याम श्रीमती शिव श्याम	15	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	95 days	135.95 + c.A.	3447=00	Sign.
12-1	श्रीमती शिव श्याम श्रीमती शिव श्याम	15	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	95 days	135.95 + c.A.	3447=00	Sign.
Pay Rs. 36538																																		26538	G. Total	36538	Sign.	

Accountant (HG) Sr. A.O. 16/7/08
Certified that the workers mentioned in the muster roll were actually employed by me on NDMC works and they were actually paid on my identification in PE RISE FOR CASH CHECK OF PAYMENT

MOH: Released to (N.K. GOEL) AO (PH)

Grat. Total of this Muster Roll: XXX

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

