Contingent Bill Number : 30301080900072

72/H
14/1/09

Disbursement Type: Cash
Bill Type: ImprestBills
Fund: NDMC Municipal General Fund
Bill Date: 12-Jan-2009
Segment: GENERAL FUND
Sub Segment: CASH IN HAND
Field: PUBLIC HEALTH ACCOUNTS BRANCH
Sub Field: (PUBLIC HEALTH) SANITATION CIRCLE 6
Functionary: DIRECTOR (PH)
Payable To: Secretary,NDMC
Sanction By: Chairman
Sanctioned On: 16-Jun-2008
SanctionDetails: Sanctioned By Chairman NDMC vide No. 4383/PS/CH dated 16/06/2008 vide OO D/396/CMO(HQ) dt. 16/09/2008
Bill Status: CREATED
Narration: Payment of 27 daily wages SKs/LBs Circle No. 6 @ 140 plus CA Rs.66/- Per Month w.e.f. 01/12/2008 to 13/12/2008
Remarks:

Code	Payable To	Function	Account Code	Account Head	Amount
		Public Health	3202027	MECH.OF GARBAGE REMOVAL	35892
				Gross Amount	35892

Deductions:

Code	Payable To	Function	Account Code	Account Head	Amount
				Total Deduction	0
				Net Amount	35892

Net Payable in Words :

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

Sheet-V

HEALTH DEPARTMENT

MUSTER ROLL NO. 326 (From 1/12/08 To 13/12/08)

Circle No. VI Voucher No. ..... Dated .....

In continuation of Muster Roll No. 278 12/H 14/1/09

PART-NOMINAL-ROLL

Accountant (HG) CHIEF MEDICAL OFFICER

S.No.	Name, Father's/Husband's Name & Address grouped accc rding 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
26. Sh.	Ajay S/o Sh. Asha Ram R/o 9/122 Bapu Dham Chandaya Puri New Delhi	Sk.	20	19	23	19	17	22	S	22	14	19	18	18	18																			240 days 12 days		3417-00 1709.00	
27. Sh.	Ravinder Kr S/o Sh. Jai Pal Vice Sh. Satish S/o Sh. Mathura Lal. WZ-12 Sheri Jan Basti Tilak Nagar New Delhi	do	A	A	A	A	A	A	A	A	A	A	A	A	A																						
28	Vacant Post	do																																			
		Daily Total	21	24	20	20	23	17	25	22	14	19	18	18	18																			232 days	G. Total	35892-00	
		Initials of person marking the daily attendance																																252 days			

Pay to Staff Rs = 35892-00

CIA 35892

Initials of Inspecting Officer

Pay Rs. 35892/- (Rupees Rs Thirty five Thousand Eight hundred Ninety two only)

Received from 7/1/09 Entry A page No 41 Serial No 1118

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.

CANCELLED

Released for Sr. A.O.

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

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

Rs.	P.

Sheet-IV

HEALTH DEPARTMENT

MUSTER ROLL NO. 326 (From 1/12/08 To 13/12/08)

Circle No. VI Voucher No. ..... Dated .....

In continuation of Muster Roll No. 278

Accountant (HG) CHIEF MEDICAL OFFICER

PART-NOMINAL-ROLL

S.No.	Name, Father's/Husband's Name & Address grouped accc rding 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
			13	13	14	15	16	17	X	17	19	14	15	13	13																						
21.	Sh. Vikram S/o Sh. Ram Rattan R/o C-4/Palika Dham New Delhi	SK	P P P	P P P	P P P	P P P	P P P	P S P	P	P H P	P P P	P P P	P P P	P P P																				12 days		1709-00	Sd/ Ally
22.	Smt Kirianti W/o Sh. Suresh A/68 D.D.A Flat East of Kailash New Delhi	do	P A P	A A P	A A P	A A P	P P P	S	P P P	P P P	P P P	P P P	P P P	P P P	P P P																			08 days		1140-00	Sd/ Ally
23.	Sh. Roshan Lal S/o Sh. Chander R/o A/31 D.D.A Flat East of Kailash New Delhi	do	P P P	P P P	P P P	P P P	P P P	P S P	P	P P P	P P P	P P P	P P P	P P P	P P P																			12 days		1709-00	Sd/ Ally
24.	Sh. Mukesh S/o Sh. Thawariya R/o 1/74 Sarai Kala Khan New Delhi	do	P P P	P P P	P P P	P P P	P P P	P S P	P	P H P	P P P	P P P	P P P	P P P	P P P																			12 days		1709	Mukesh Sd/ Ally
25.	Sh. Gayam Parkash S/o Sh. Shyam Parkash R/o A/230 NEW Kondli Delhi 91	do	P P P	P P P	P P P	P P P	P P P	P S P	P	P H P	P P P	P P P	P P P	P P P	P P P																			12 days		1709	Sd/ Ally
		Daily Total	19	19	19	19	19	19	S	19	19	19	18	18	18																			220 days	G. Total	34183-00
		Initials of person marking the daily attendance	A	A	A	A	A	A	S	A	A	A	A	A	A																			240 days		
		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

Total amount paid (in words) Rupees ..... Balance Paid

Rs.	P.

Sheet-III

HEALTH DEPARTMENT

MUSTER ROLL NO. 326 (From 1/12/08 To 13/12/08)

Circle No. VI Voucher No. ..... Dated .....

In continuation of Muster Roll No. 278

Accountant (HG) CHIEF MEDICAL OFFICER

PART-NOMINAL-ROLL

S.No.	Name, Father's/Husband's Name & Address grouped according to classes	Designation D/wagon	Dates From 1/12 To 13/12 (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. Perveen S/o Sh. Dhanna R/o 113 Harijan Basti M/Marg N.Dl	Sk.	A P P P P P A P H A A A A	07 days		993-00	Sy Ally QL
17	Sh. Ajay S/o Sh. Firey Singh R/o D/46 Mandir Marg N.Dl	do	P P P P P P A P H P P P P	12 days		1709-00	Sy Ally QL
18	Sh. Yes Pal S/o Sh. Kamal R/o S/40 Mandir Marg N.Dl	do	P P P P P P A P H P P P P	12 days		1709-00	Sy Ally QL
19	Sh. Vivek S/o Sh. Babu Lal R/o B No 43 Block No. 5 Kali Badi Marg N.Dl	do	P P A P A A A A H A A A A	02 days		285-00	Sy Ally QL
20	Sh. Anil S/o Sh. Ram Saran R/o 3/37 Ba Pa Dham N.Dl	do	A A P P P A P A H A A A A	05 days		712-00	Sy Ally QL
	Daily Total		15 15 9 15 13 7 + 7 9 14 13 13 13	184 days	G. Total	26207-00	
	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

Balance Paid

Rs.	P.

Sheet-II

HEALTH DEPARTMENT

MUSTER ROLL NO. 326 (From 1/12/08 To 13/12/08)

Circle No. VI Voucher No. ..... Dated .....

In continuation of Muster Roll No. 278

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 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
11.	Smt Maya Devi W/o Sh. Satish R/o H/D.O.S/2485/Sultan Pur # 01-41	Wr	9 10 10 8 8 10 7 10 9 10 9 10 10 9	8 days		1595-20 114020	1/12/12 Sy Alley Q
12.	Sh. Gorav S/o Sh. Kamal S/40, Mandir Marg N Dl	do	A A A A A A A A A A A A A A	Nil		Nil	
13.	Sh. Vikash S/o Sh. Ganesh Chand. 1/480 T/Pur 01-81	do	8 A 8 8 A 8 5 8 H 8 8 A A	07 days		997-00	1/12/12 Sy Alley Q
14.	Sh. Arun S/o Sh. Jagdish 44/Balmiki Basti M/Marg N Dl	do	8 8 8 8 8 8 5 8 H 8 8 8 8	12 days		1709-40	Sy Alley Q
15.	Sh. Ravi S/o Sh. Belo Ram 57/Harijan Basti M/Marg N Dl	do	A A 8 8 A 8 5 8 H 8 A 8 A	07 days		997-00	Sy Alley Q
	Daily Total		14 12 14 11 10 13 5 13 14 12 11 13 11	146 days	G. Total	20795-60	
	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

Total amount paid (in words) Rupees ..... Balance Paid

Rs.	P.

Sheet-I

HEALTH DEPARTMENT

MUSTER ROLL NO. 326 (From 1/12/08 To 13/12/08)

Circle No. VI Voucher No. ..... Dated .....

In continuation of Muster Roll No. 278

PART-NOMINAL-ROLL

Accountant (HG) CHIEF MEDICAL OFFICER

Dates From 1/12 To 13/12

S.No.	Name, Father's/Husband's Name & Address grouped accc rding 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
6. Smt	Khushboo W/o Sh. Rajender R/o A/131/A/5 Janak Puri N. Delhi	Sk.	P	P	P	P	P	P	(S)	P	H	P	P	P	P									18										12 days		1709-00	Sy Ally
7. Smt	Meera W/o Sh. Vinod R/o F/6 Lodhi Road N. Delhi	do	P	P	P	P	P	P	(S)	P	H	P	P	P	P									18										12 days		1709-00	Sy Ally
8. Sh.	Sanjeev S/o Sh. Ram Sarup R/o S/26 Balmiki Basti Mandawali N.D.	do	P	P	P	P	P	P	(S)	P	H	P	P	P	P									18										12 days		1709-00	Sy Ally
9. Sh.	Dinesh S/o Sh. Ramkishan R/o 9/6 Palika Dham N.D.	do	P	P	P	P	P	P	(S)	P	H	P	P	P	P									18										12 days		1709-00	Sy Ally
10. Smt.	Sarita W/o Sh. Sunil R/o F/12. P.R. Lane N.D.	do	P	P	P	P	P	P	(S)	P	P	P	P	P	P									18										12 days		1709-00	Sy Ally
	Daily Total		9	10	10	8	8	10	5	10	10	9	9	10	9																			112 days	G. Total	15952-00	
	Initials of person marking the daily attendance		a	a	a	a	a	a	s	a	a	a	a	a	a																						
	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

Total amount paid (in words) Rupees ..... Balance Paid

Rs.	P.

O.O. No:- D/396/CMO/HQ Dt. 16/9/08 Chairman approval No - 4383/D/PS Dt 16-9-08 (28) daily wager Sk, LIBE

(145) Total Sheet = 6

HEALTH DEPARTMENT

MUSTER ROLL NO. 326 (From 1/12/08 To 13/12/08)

Circle No. VI Voucher No. ..... Dated .....

In continuation of Muster Roll No. 278

PART-NOMINAL-ROLL

Accountant (HG), CHIEF MEDICAL OFFICER

S.No.	Name, Father's/Husband's Name & Address grouped accc rding to classes	Designation D/Wager	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
1. Sh.	Deepak S/o Sh. Mahavir R/o 208 A/2 Savitry Nagar New Delhi	Sk.	P P P P P P	P P P P P P	P P P P P P	P P P P P P	P P P P P P	(S)	P P P	H	P P P P P P	P P P P P P	P P P P P P	P P P P P P	P P P P P P									18									12 days		1709-00	Sy Alley RL
2. Smt	Babita W/o Sh. Jagdish 235/190 Labour Camp Tughlaq Nagar New Delhi	do	P P P P P P	P P P P P P	P P P P P P	(A)	P P P P P P	P P P P P P	(S)	P P P P P P	P P P P P P	P P P P P P	P P P P P P	P P P P P P	P P P P P P									18									11 days		1567-00	RTI Alley RL
3. Sh.	Devaker S/o Sh. Lal H/No 1 of Harijan Basti R/o M/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	(A)	P P P P P P	(S)	P P P P P P	H	(A)	(A)	P P P P P P	(A)									18									08 days		1140-00	Sy Alley RL
4. Smt	Geeta W/o Sh. Sanjeev R/o F/8 Ali Ganj New Delhi	do	(A)	P P P P P P	P P P P P P	(A)	(A)	P P P P P P	(S)	P P P P P P	P P P P P P	P P P P P P	P P P P P P	P P P P P P	P P P P P P									18									09 days		1282-00	Sy Alley RL
5. Smt	Krishna W/o Sh. Jagan Singh J/29 Sect No 5, Ambedkar Nagar 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	(S)	P P P P P P	P P P P P P	P P P P P P	P P P P P P	P P P P P P											18									12 days		1709-00	Sy Alley RL
		Daily Total	4	4	4	4	4	5	4	4	4	4	4	4	4																			52 days	G. Total	7407-00	
		Initials of person marking the daily attendance																																			
		Initials of Inspecting Officer																																			

Pay Rs. ..... (Rupees .....)

	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		

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.