

# HEALTH DEPARTMENT

**MUSTER ROLL NO.** 809

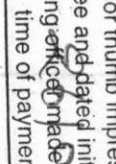
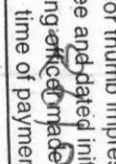
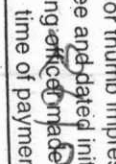
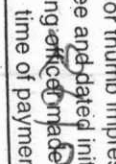
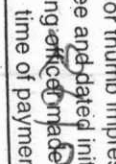
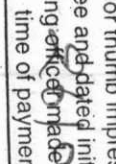
(From 1/9/05 To 4/9/05)

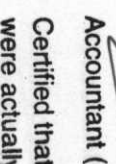
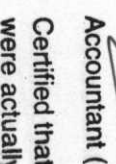
Sheet-I

Circle No. 14 Voucher No. 764 Dated 13/10/09

In continuation of Muster Roll No. 764

**PART-NOMINAL-ROLL**

S.No.	Name, Father's/Husband's Name & Address grouped according to classes	Designation	Dates From..... To.....																															Total Days	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			P.	R.	
7	Sh. Susindas S/o Anand Singh 18/145 - 1st Flr Calony Chh. Rd - do - New Delhi.	Trmr	o	o	o	o	o	o	o	o	o	o	o	o	o	o	o	o	o	o	o	o	o	o	o	o	o	o	o	o	o	o	o	o	15	15	150000	
8	Sh. Anil Kt S/o Hanu Choudh T-304, Anandkumar Nagar Dakshinpur, New Delhi.	do	o	o	o	o	o	o	o	o	o	o	o	o	o	o	o	o	o	o	o	o	o	o	o	o	o	o	o	o	o	o	o	10	10	100000		
9	Mrs Bonnem O/o Omparkar 7/119 - Tilak Bldg New Delhi 9,	do	o	o	o	o	o	o	o	o	o	o	o	o	o	o	o	o	o	o	o	o	o	o	o	o	o	o	o	o	o	o	o	14	14	140000		
10	Sh. Jitender S/o Kemnal 10/107 - Tilak Bldg New Delhi-9,	do	o	o	o	o	o	o	o	o	o	o	o	o	o	o	o	o	o	o	o	o	o	o	o	o	o	o	o	o	o	o	o	14	14	140000		
11	Sh. Kavi Kumar S/o Chiranjit R-372 Dakshin Purbi do - New Delhi.	do	o	o	o	o	o	o	o	o	o	o	o	o	o	o	o	o	o	o	o	o	o	o	o	o	o	o	o	o	o	o	o	14	14	140000		
12	Sh. Jotam S/o Omparkar 50 Bahmikeri Barr. do - Menakhi Nery New Delhi.	do	o	o	o	o	o	o	o	o	o	o	o	o	o	o	o	o	o	o	o	o	o	o	o	o	o	o	o	o	o	o	o	14	14	140000		
Net Payable Rs. <u>6294-00</u>			Initials of person marking the daily attendance																																			
Pay Rs. <u>6294-00</u> (Rupees: Six thousand two hundred ninety four only) <u>Four only</u>			Initials of Inspecting Officer																																			

Accountant (HG)  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 ... 6294-00  
 Deduct-Payment made, as per details transferred to Register of Unpaid Wages 2211-00  
 Total amount paid (in words) Rupees 4083-00 Balance Paid

Sign. or thumb impression of payee and dated initials of paying officer made at the time of payment  
 CHIEF MEDICAL OFFICER

Stamp: RECEIVED for Cash Payment  
 Stamp: VERIFIED FOR CASH/DEBIT PAYMENT

