NEW DELHI MUNICIPAL COUNCIL

Payer's Copy

SR. NO. E 179846

RECEIPT

Receipt No.: CH091010NDMC036637 **Date:** 29-Oct-2009

Challan Number: 191362 **Field:** PUBLIC HEALTH ACCOUNTS BRANCH

Sub-Field: (PUBLIC HEALTH) SANITATION CIRCLE 6 **Function:** Public Health

Functionary: DIRECTOR (PH) **Received From:** SH. VED PRAKASH(S.I), CIRCLE-06

On Account of: UNPAID SALARY OF SH. SANJAY S/O OF SH. PALE RAM DAILY WAGER S/K CIRCLE-6, VIDE VR. NO. 28/H DATED: 09.10.09 FOR THE MONTH OF SEPTEMBER-2009.

Address: SH. VED PRAKASH(S.I), CIRCLE-06.

Account Code	Description	Amount
2308003	GARBAGE REMOVAL CLEARANCE	1535

Payment Mode: Cash **Total Amount:** 1535

Total Amount in Words: One Thousand Five Hundred And Thirty Five Rupees Only

Cheque/DD No.: **Cheque/DD Date:** **Bank:**

Name of the Operator: naresh.kumar **Counter No:** 1

NDMC

नई दिल्ली नगर पालिका परिषद्

Signature of Authorised Officer

RECEIPT IS SUBJECT TO REALISATION OF CHEQUE/DRAFT/PAY ORDER.

28/4
9/10/09

Sheet – II

MUSTER ROLL NO. 852. (From 5/9/09 To 30/9/09)

Circle No. 6 Voucher No. ..... Dated .....

In continuation of Muster Roll No. Fresh.

Accountant (HG) — CHIEF MEDICAL OFFICER

PART-NOMINAL-ROLL

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	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. Suresh S/o Sh. Ganga Sharan D/w Sh. B-234, Tigri Khanpur N. Delhi			22 days		3378-00	
12	Sh. Sonu S/o Sh. Ramlal S/137, East Kidwai Nagar J.J. Colony Camp Delhi	"		17 days		2610-00	
13	Sh. Jozinder S/o Sh. Rano Chander R/o E-2, D/S, Ali Ganj Lodhi Colony Delhi-110003.			21 days		3224-00	
14	Sh. Amit Kr S/o Sh. Rohtash 1/11, Bapu Dham Chanakya Puri Delhi —	"		18 days		2764-00	
	Daily Total			269 days	Total	41303-00	
	Initials of person marking the daily attendance						
	Initials of Inspecting Officer						

Entry has been made on page 58 at Sr. No. 1-18. S.O (H.S.) 7-10-09

Net Payable Rs 41,303-00

Pay Rs. 41,303-00 (Rupees Forty one thousand three hundred & three only)

Accountant (HG)

AAO (PH) 6/10/09

CANCELLED — M.O.H. Sr. AO — Released for Payment

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.

VERIFIED FOR CASH/CHEQUE PAYMENT

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.

HEALTH DEPARTMENT

Sheet I

MUSTER ROLL NO. 852. (From 5/9/09 To 30/9/09)

Circle No. 6. Voucher No. ..... Dated .....

In continuation of Muster Roll No. Fresh.

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
06	Sh. SANJAY S/o Sh. PALE RAM L-439, J.J. Colony. Shakur Pur Basti Delhi –	Slw Sly		10 days		1535-00	Deposit in PH (AK) Receipt No. CH 091010 Dt 03 6637
07	Sh. VIKRAM S/o Sh. UMED SINGH J-188, Dakshin Puri Ext – Delhi – 62.	"		20 days		3071-00	Sign
08	Sh. AMIT S/o Sh. SHIV CHARAN R/o 5/63, Bapu Dham Chanakya Puri Delhi –	"		22 days		3378-00	Sign
09	Sh. PRAVEEN KR. S/o Sh. KANWAR PAL D-317 School Block. Nathu Colony. Delhi – 93.	"		22 days		3378-00	Sign
10	Sh. SANDEEP KR. S/o Sh. KANWAR PAL D-317 School Block Nathu Colony. Delhi –	"		22 days		3378-00	Sign
	Daily Total			146	G. Total	29327-00	
	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

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

Rs.	P.

O.O. No:- D/417/CMO/HQ Dt. 4/9/09

(14) daily wages 8½, 4½ @ 15/- EEA per day

HEALTH DEPARTMENT

MUSTER ROLL NO. 852 (From 5/9/09 To 30/9/09)

(1+2) = 3 sheet

Circle No. 6 Voucher No. ..... Dated .....

In continuation of Muster Roll No. Fresh

Accountant (HG) CHIEF MEDICAL OFFICER

PART-NOMINAL-ROLL

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
01	Sh. Gourav S/o Sh. Vinod Kr R/o 2, Bhagat Lane Jangpura Delhi	D/W Sk		20 days		3071-00	
02	Sh. Vishal S/o Sh. Vijay Kr. R/o 4, Humayun Rd Delhi-29.	"		22 days		3378-00	
03	Sh. Anil S/o Sh. Nanak Chand H/6, Patel Dham Delhi-110001.	"		20 days		3071-00	
04	Sh. Anil Kr S/o Sh. Kreshbabu 85/0, Sec-I, Pushp Vihar Delhi	"		22 days		3378-00	
05	Sh. Praveen S/o Sh. Naresh Kr Shiv Maha Kali Mandir M/S Plate Ali Ganj Delhi-03.	"		11 days		1689-00	
	Daily Total			95 days	G. Total	14587-00	
	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

Balance Paid