Sheet-5

HEALTH DEPARTMENT

MUSTER ROLL NO. 870 (From 1/10/09 To 31/10/09)

Circle No. 11 Voucher No. 43/H Dated 12/11/09

In continuation of Muster Roll No. 840

Accountant (HG) — CHIEF MEDICAL OFFICER

PART-NOMINAL-ROLL

S.No.	Name, Father's/Husband's Name & Address grouped accccrding to classes	Designation	Dates From ... To ... (1 24, 2 25, 3 22, 4, 5 23, 6 21, 7 19, 8 19, 9 21, 10 21, 11, 12 21, 13 19, 14 22, 15 22, 16 22, 17 22, 18, 19 16, 20 19, 21 22, 22 22, 23 21, 24 21, 25, 26 22, 27 22, 28 22, 29 23, 30 19, 31 19)	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	Smt Sunita w/o Ashok Kr Q-No 8, Type-5 Lajpat Nagar H.O		P P H P P S P P P P P P S P P P P P P H S P P P P P P S P P P P P P	27 days	151 7 C.A.	4143-00	Paid
27	Sh Shekhar S/o Sh Babulal C-17 Palika Vihar N.D 110001		P P H P P S P P P P P P S P P P P P P H S P P P P P P S P P P P P P	27 days	-do-	4143-00	Paid
28	Smt Krishna w/o Parkash 94/2 Yusuf Sarai N.D		P P H P P S P P P P (A) (A) S P P P P P P H S P P P P (A) P P S P P (H) P P P P P	23 days	-do-	3529-00	Paid
29	Sh Anand S/o Chatter Singh G-334 Purani Seema Puri Delhi 95		(A) H (A) S P P (A) P P P (A) S P P (A) P P P H S (A) P P P (A) (A) S P P P P (A) P (A)	16 days	-do-	2455-00	Paid
30	Sh Ravi S/o Sh Babulal C-17 Palika Vihar N.Delhi		P P H (A) S P P P (A) (A) (A) (A) S (A) (A) (A) P P P H S (A) P P P P P (A) S P P (A) (A) (A) (A) (A)	12 days	-do	1841-00	Paid
			Daily Total 28 29 25 28 25 23 23 24 23 25 23 25 27 27 27 19 24 27 26 25 24 27 25 27 26 23 22	678 days	G. Total	10,033-00	
			Initials of person marking the daily attendance				
			Initials of Inspecting Officer				

Entry has been made SR No 1653 on Page No 62

Net Payable Rs 1,04,033-00

Pay Rs. 1,04,033-00 (Rupees One lac four thousand thirty three only)

Balance Rs. 1228/- of S.No. 18 Sh. Rajpal c/o Sh. Beharilal duly wage safety insurance has been deposited in NDMC Treasury vide C.R. No. E-111937 dt 26/11/2009. Receipt - paste below.

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

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

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

Rs.	P.

CANCELLED — VERIFIED FOR CASH/CHEQUE PAYMENT

Sheet-4.

HEALTH DEPARTMENT

MUSTER ROLL NO. 870 (From 1/10/09 To 31/10/09)

Circle No. 11 Voucher No. ..... Dated .....

In continuation of Muster Roll No. 840

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
21	Sh Narendra Kr S/o Ashok Kr 10/38 Trilok Puri Delhi-91		A H P S A A A A P P S A P P P H S P A A P P P S P P P P P P	19 days	151 + C.A	2915-00 Paid	
22.	Sh Lala Ram S/o Dharmu Ram T-4 Tilto Kalu Sarai N-16		P H P S P P P P A P S A P P P H S A A P A P S P A P P A A	19 days	do-	2915-00 Paid	
23.	Smt Sunita w/o Hem Raj 10/90 Trilok Puri Delhi 91		P H P S P P P P P P S P P P P H S P P P P P S P P P P P P	27 days	do-	4143-00 Paid	
24.	Sh Mahesh S/o Mether Lal T-1 Kalu Sarai T-Huts N-20-16		P H P S P P P P P P S P P P P H S P P P P P S P P P P P P	27 days	do-	4143-00 Paid	
25	Smt Munni w/o Dharam Pal B-11555-Colony Sect-7 Dwarka Delhi 45		P H P S P P P P P P S P P P P H S P P P P P S P P P P P P	27 days	do-	4143-00 Paid	
	Daily Total		24 25 22 23 21 19 19 21 21 21 19 22 22 22 22 22 16 19 22 22 21 21 22 22 23 23 19 19	573 days	G. Total	87922-00	
	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.

NEW DELHI MUNICIPAL COUNCIL

Payer's Copy

SR. NO. E

RECEIPT

111937

Receipt No.: CH091011NDMC042061 **Date:** 26-Nov-2009

Challan Number: 197697 **Field:** PUBLIC HEALTH ACCOUNTS BRANCH

Sub-Field: (PUBLIC HEALTH) SANITATION CIRCLE 11 **Function:** Public Health

Functionary: DIRECTOR (PH) **Received From:** SH. J.S. MALIK(S.I.), CIRCLE-11

On Account of: UNPAID SALARY OF SH. RAJ PAL S/O SH. BABU LAL DAILY WAGER S/K, CIRCLE-11 VIDE VR. NO. 43/12.11.09 FOR THE MONTH MONTH OF OCTOBER-2009

Address: SH. J.S. MALIK(S.I.), CIRCLE-11, NDMC.

Account Code	Description	Amount
2308003	GARBAGE REMOVAL CLEARANCE	1228

Payment Mode: Cash **Total Amount:** 1228

Total Amount in Words: One Thousand Two Hundred And Twenty Eight Rupees Only

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

Name of the Operator: rachna.cash **Counter No:** 1

Signature of Authorised Officer

RECEIPT IS SUBJECT TO REALISATION OF CHEQUE/DRAFT/PAY

HEALTH DEPARTMENT

MUSTER ROLL NO. 870 (From 1/10/09 To 31/10/09)

Circle No. 11. Voucher No. ..... Dated .....

In continuation of Muster Roll No. 840.

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
16	SH. Vijay S/o Sh. Babulal 10/3 Trilok Puri N. Delhi-91	Daily wages S/k	P P P H P P P S P P P (A) P P P P S P P P P P P P P H S (A) P P P P P P S P P P P P P P	25 days	151 + C.A.	3836-00 Paid	
17	SH. Vijay S/o Sh. Mohinder Singh 10/03 Trilok Puri N. Delhi-91	"	P P P H (A) S P P P P P P P P S P P P P P P P P P P P P P H S P P P P P P P P S P P P P P P P	26 days	-do-	3989-00	
18	SH Rajpal S/o Sh Babu Lal C-502 Ujjwal Pur J.J. Colony Delhi		P P P H P P P S (A) P P (A) (A) (A) (A) S (A) (A) (A) (A) (A) H S (A) (A) (A) (A) P P P (A) S P P P P P P (A) (A) (A)	08 days	-do-	1228-00	
19	SH Ajay Kr S/o Sh Suresh Chand B-391 Bapu Dham Chanakya Puri N.D-21		P P P H P P P S P P P (A) P P P P S (A) (A) P P P P P P P H S P P P P P P P P S P P P P P P P	24 days	-do-	3683-00 Paid	
20	SH Naresh S/o Sh Girdhari Lal 10/83 Trilok Puri Delhi 91		P P P H P P P S P P P P P P P P S P P P P P P P P P P P P P H S P P P P P P P P S P P P P P P P	27 days	-do-	4143-00 Paid	
	Daily Total		20 20 17 19 17 15 15 17 16 16 16 17 17 17 17 18 16 18 17 17 16 17 18 18 18 15 15	454 days	G. Total	69663-00	
	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.

Sheet-II

HEALTH DEPARTMENT

MUSTER ROLL NO. 870 (From 1/10/09 To 31/10/09)

Circle No. 11 Voucher No. .... Dated ....

In continuation of Muster Roll No. 840

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
			10	10	8	–	10	9	7	7	8	7	–	8	9	8	8	8	8	–	5	8	9	8	8	7	–	7	9	9	7	7	218 days		33451-00	
11	SH. Vikash s/o SH. Ramesh Kumar S-18 Prithvi Raj Lane Khan Mkt	Daily wages S/K	P	H	P	S	P	(A)	P	P	P	P	S	P	(A)	P	P	P	H	S	(A)	(A)	P	P	(A)	P	S	P	(A)	P	P	(A)	(A)	19 days	157 C.A.	2915-00 Paid	[signature]
12	Smt Mamta w/o SH Ashok Kumar 793 Servent Qrt South Lane	"	P	H	P	S	P	P	P	P	P	P	S	P	P	P	P	P	H	S	P	P	P	P	P	P	S	P	P	P	P	P	P	27 days	-do-	4143-00 Paid	[signature]
13	SH. Hemant Kumar s/o SH Vinod F-9 N.D.M.C Flat Ali Ganj	"	P	H	P	S	P	P	P	P	P	P	S	P	P	P	P	P	H	S	P	P	P	P	P	P	S	P	P	P	P	P	P	27 days	-do-	4143-00 Paid	[signature]
14	SH. Ramdev s/o SH Faquir Chand 186 New Seemapuri N Delhi	"	P	H	P	S	P	P	P	P	P	P	S	P	P	P	P	P	H	S	P	P	P	P	P	P	S	P	(A)	P	P	P	P	26 days	-do-	3989-00 Paid	Ram Dev [signature]
15	Smt Bimla w/o SH. Natholi F-1C Ali Ganj Lodhi Road	"	P	H	P	S	P	P	P	P	P	P	S	P	P	P	P	P	H	S	P	P	P	P	P	P	S	P	P	P	P	P	P	27 days	-do-	4143-00 Paid	[signature]
	Daily Total		15	15	13		15	13	12	12	13	12		13	13	13	13	13	13		9	12	14	13	12	12		12	13	13	14	11	11	344 days	G. Total	52784-00	
	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

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

HEALTH DEPARTMENT

Sheet-I

MUSTER ROLL NO. 870 (From 1/10/09 To 31/10/09)

Circle No. 11 Voucher No. ..... Dated .....

In continuation of Muster Roll No. 840

Accountant (HG) CHIEF MEDICAL OFFICER

PART-NOMINAL-ROLL

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 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 Preeti w/o SH. Mukesh 140 Maharani Enclave Uttam Nagar	Daily wages S/K	P P P H P P P P P P P S P P P P P P H P S P P P P P P S P P P P P P	27 days	151 + CA	4143-00 Paid	
7	SH. Rahul S/-SH. Omperkash L-481 Shakur Pur J.J. Colony	"	P P P H A S P P P P A P S P P P P P H P S A P P P P A A	15 days	-do-	2302-00 Paid	
8	SH. Vinod S/- SH. Ramesh A-160 Jwala Puri Delhi-86	"	P P P H P P P S P P A A A A S A A A A A H S A A A A A S A A A A A A	04 days	-do-	614-00 Paid	
9	Smt Geeta w/o SH. Rakesh 18/445 Jwala Puri N Delhi	"	P P P H P P P S P P P P P P P P P H S P P P P P P P S P P P P P P P	27 days	-do-	4143-00 Paid	
10	SH. Sanjay S/- SH Omperkash 1153 Gautam Puri N- Delhi-44	"	P P P H A S P P P A A A S P P P P P P H S A P P P P A P S P P P P P P A	19 day	-do-	2915-00 Paid	
	Daily Total		10 10 8 10 9 7 7 8 7 8 9 8 8 8 8 0 5 8 9 8 8 7 7 9 9 9 7 7	218 days	G. Total	33,451-00	
	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/360/CMO/HQ Dt 18/8/09.

(30) daily wages Sk, L/B @ 151 + CA per day

(175) = 6 Sheet.

HEALTH DEPARTMENT

MUSTER ROLL NO. 870 (From 1/10/09 To 31/10/09)

Circle No. 11 Voucher No. ..... Dated .....

In continuation of Muster Roll No. 840

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
I	SH. Azad Singh S/o SH. Ramkishan B-13 Mahavir Enclave N. Delhi	Daily wages Sk	P	H	P	S	P	P	P	P	P	P	S	P	P	P	P	P	H	S	P	P	P	P	P	P	S	P	P	P	P	P	P	27 days	151+CA, 2	4143-00	
2	SH. Ashok kumar S/o SH. Balwan Singh G-31/38 Sai Enclave Part I Mohan Garden N. Delhi	"	P	H	P	S	P	P	P	P	P	P	S	P	P	P	P	P	H	S	A	P	P	P	P	A	S	P	P	P	P	A	P	21 days	do-	3683-00	
3	SH. Vikash S/o SH. Dayaram A-862 Jaola Part Delhi	"	P	H	P	S	P	P	A	P	P	P	S	A	P	P	P	P	H	S	A	A	P	P	P	P	S	A	P	P	P	P	P	21 days	do-	3222-00	
4	Smt. Darshana w/o SH. Vishal 129/A Masjid Moth N. Delhi	"	P	H	P	S	P	P	P	P	P	P	S	P	P	P	P	P	H	S	P	P	P	P	P	P	S	P	P	P	P	P	P	27 days	do-	4143-00	Darshana
5	Smt. Sunita w/o SH. Rajender H. No. 5 Sachdari Nagar	"	P	H	P	S	P	P	P	P	P	P	S	P	P	P	P	P	H	S	P	P	P	P	P	P	S	P	P	P	P	P	P	27 days	do-	4143-00	Sunita
		Daily Total	5	5	5		5	5	4	5	5	5		4	5	5	4	5	5		3	4	5	5	5	4		4	5	5	5	4	5	126 days	G. Total	19334-00	
		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.