

**Contingent Bill Number :** 30312091000080

**Disbursement Type:** Cash  
**Fund:** NDMC Municipal General Fund  
**Segment:** GENERAL FUND

**Bill Type:** ImprestBills  
**Bill Date:** 11-Dec-2009  
**Sub Segment:** CASH IN HAND

**Field:** PUBLIC HEALTH ACCOUNTS BRANCH  
**Functionary:** DIRECTOR (PH)  
**Sanction By:** The Chairman

**Sub Field:** (PUBLIC HEALTH) SANITATION CIRCLE 13  
**Payable To:** Secretary,NDMC  
**Sanctioned On:** 01-Jul-2002

**SanctionDetails:** Office Order No. D-1234/SO(HE-III)/GC-III dated: 01.07.2002 vide approval of Director(P)

**Bill Status:** CREATED

**Narration:** Payment to 02 RMR Safai Karamcharis in Circle No.-13 w.e.f. 01.11.09 to 30.11.09

**Remarks:**

*89/H*  
*14/12/09*

Code	Payable To	Function	Account Code	Account Head	Amount
		Solid Waste Management	2308003	GARBAGE REMOVAL CLEARANCE	7221
<b>Gross Amount</b>					7221

**Deductions:**

Code	Payable To	Function	Account Code	Account Head	Amount
			3502009	LWO (BENOVELENT FUND)	90
<b>Total Deduction</b>					90
<b>Net Amount</b>					7131

Net Payable in Words :

<b>Created By</b>	neelam.uniyal	<b>Verified By</b>	
<b>Confirmed By</b>		<b>Approved By</b>	
<b>Final Approved By</b>			



Health Deptt / C-XIII

Recovery Schedule of B/F of the Following RMR  
SM of C-XIII of Health, for the month of NOV-2009.

S. No.	Name / Fathers	Desi.	Amount.
1.	Sh. Pradeep s/o Saakey Ram	SM (RMR)	Rs 45.00
2.	Sh. Ram Chander s/o Babul Lal	do -	Rs 45.00
			<hr/>
			57 Rs 90.00
			<hr/>

(Rupees Ninety only)

SM  
21/11/09  
SI-XIII

AS1-B



# HEALTH PARTMENT

## MUSTER ROLL NO.

C-XIII

Circle No. X111 Voucher No. *PMR* Dated *30/11/09*

1-11-09 To 30-11-09

### PART-NOMINAL-ROLL

S.No.	Name, Father's/Husband's Name & Address grouped according to classes	Designation	Dates From		Total	Rate	Amount		Sign. or thumb impression of payee and dated initials of paying officer made at the time of payment
			To	To			P.	P.	
1.	<i>Sh. Pradeep s/o Sukrey Ram R/o B-51 Kham Puz N.D-62.</i>	<i>SWR</i>	<i>1</i>	<i>2</i>	<i>240/5</i>	<i>151.66</i>	<i>3841-00</i>	<i>3689</i>	<i>3642-00</i>
2.	<i>Sh. Ram Cander s/o Babu Lal R/o S-2 Gandhi Marg N.D.</i>	<i>SWR</i>	<i>1</i>	<i>2</i>	<i>234/5</i>	<i>72.21</i>	<i>7221-00</i>	<i>90</i>	<i>7131-00</i>
							<i>7375-00</i>	<i>90-00</i>	<i>7285-00</i>

*Gross Amount = 7221-00*  
*B/F - 90*  
*Net Payable = 7131-00*

**VERIFIED FOR CASH/CHIEF PAYMENT**  
 Initials of person marking the daily attendance  
 Initials of Inspecting Officer

Pay Rs. *7131-00* (Rupees *seven thousand one hundred & thirty one only*)

Accountant (HG) *V. S. ...*

Sr. A.O.

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 my presence.

Accountant (HG),

CHIEF MEDICAL OFFICER

Signature and thumb impression of Chief Medical Officer

Grand Total of this Muster Roll ...

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

Balance Paid

Rs.	P.
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**CANCELLED**