

Contingent Bill Number : 30303080900020

Disbursement Type: Cash

Bill Type: ImprestBills

Fund: NDMC Municipal General Fund

Bill Date: 05-Mar-2009

Segment: GENERAL FUND

Sub Segment: CASH IN HAND

Field: PUBLIC HEALTH ACCOUNTS BRANCH

Sub Field: (PUBLIC HEALTH) SANITATION CIRCLE 12

Functionary: DIRECTOR (PH)

Payable To: Secretary,NDMC

Sanction By: Chairman

Sanctioned On: 15-Dec-2008

SanctionDetails: Office order No. D-554/CMO (HQ) dt. 17.12.2008 approval of chairman 8242/D/PS dt. 15.12.2008

Bill Status: VERIFIED

Narration: payment to 4 daily wager SK in C.No. 12 @ 140 per day+66 CA Per month w.e.f. 01.02.2008 to 28.02.2008

Remarks:

Code	Payable To	Function	Account Code	Account Head	Amount
		Public Health	3202027	MECH.OF GARBAGE REMOVAL	10420
Gross Amount					10420

Deductions:

Code	Payable To	Function	Account Code	Account Head	Amount
Total Deduction					0
Net Amount					10420

Net Payable in Words :

Created By	neelam.uniyal	Verified By	prem.sharma
Confirmed By		Approved By	
Final Approved By			

मस्टर रोल नं० MUSTER ROLL NO.

465

से From 01/02/09 तक To

28/02/09

only copy 5/11/09
140 = 02 + CP-66/-
only one sheet.

प्रभाग Division...
कार्य का नाम Name of work...
मस्टर रोल नं. के अनुक्रम में In continuation of Muster Roll No.

हजिरी रोल PART-NOMINAL ROLL

C No - XII

वाचन नं. Voucher No.

दिनांक Dated

क्रम सं. S. No.
नाम पिता/पति का नाम एवं पता
(वैसास के अनुसार ग्रुप)
Name, Father's/Husbands Name & Address
grouped according to chasses

दिनांक Dates from... से To... तक

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
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दर Rate
गति Amount
भुगतान प्राप्त करने वाले के हस्ताक्षर या अंगूठा निशानी और भुगतान के समय भुगतान करने वाले अधिकारी के हस्ताक्षर व दिनांक
Sign. or thumb impression of payee and dated initials of paying officer made at the time of payment

क्रम सं.	नाम पिता/पति का नाम एवं पता	पदनाम Designation	दिनांक Dates from To तक																															Total	दर Rate	गति Amount	अधिकारी का हस्ताक्षर														
1	sh. S. Dwany S/O Ravinder S-22 Kham markit Puthvi Raj Leam n. delhi	Sub-Inspector	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	P	P	P	P	Rs. 144/- P 66/-	3426/-	Paid	(Signature)					
2	sh. Mehinder S/O Ghanshyam 15/2 Kalyanvats n. delhi		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	P	P	P	P	P	P	Rs. 144/- P 66/-	3283/-	Paid	(Signature)			
3	sh. Nirmal Kishor S/O Nirmal Kishor S/O J-423 Vazir Pur J. J. Comp n. delhi		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	P	P	P	P	P	P	P	P	P	Rs. 144/- P 66/-	498/-	paid	(Signature)

रु. 10490 = 00
Pay Rs. Ten thousand four hundred and twenty only

दैनिक हाजिरी लेने वाले व्यक्ति के हस्ताक्षर
Initials of person making the daily attendance
निरीक्षण अधिकारी के हस्ताक्षर
Initials of Inspecting Officer

इस मस्टर रोल का सहयोग
Grand Total of this Muster Roll
कटौती-विवरण के अनुसार किया गया भुगतान, भुगतान न किए गए भत्तों के रजिस्टर में स्थानांतरित किया
Deduct-Payment made, as per details transferred to Register or Unpaid Wages

अधिकारी के हस्ताक्षर
सहायक इंजीनियर
Signature of Officer
Assistant Engineer

Received on 4/12/09
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