

**Contingent Bill Number :** 30304091000046**Disbursement Type:** Cash  
**Fund:** NDMC Municipal General Fund  
**Segment:** GENERAL FUND**Bill Type:** ImprestBills  
**Bill Date:** 09-Apr-2009  
**Sub Segment:** CASH IN HAND**Field:** PUBLIC HEALTH ACCOUNTS BRANCH**Sub Field:** (PUBLIC HEALTH) SANITATION CIRCLE**Functionary:** DIRECTOR (PH)**Payable To:** Secretary,NDMC**Sanction By:** Chairman**Sanctioned On:** 08-Sep-2008**SanctionDetails:**Office Order No. D-538/CMO(HQ)  
dated: 11.12.08 vide approval of  
Chairman No. 6401/D/PS dated:  
08.09.08**Bill Status:** CREATED**Narration:** Payment to 03 daily wagers SKs/LBs  
in circle No. -13 w.e.f. 01.03.09 to  
07.03.09 @142+CA per day**Remarks:**

10 / PH  
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13 / 10 9  
15 / 4 / 0 9

Code	Payable To	Function	Account Code	Account Head	Amount
		Public Health	3202027	MECH.OF GARBAGE REMOVAL	1734
<b>Gross Amount</b>					1734

**Deductions:**

Code	Payable To	Function	Account Code	Account Head	Amount
<b>Total Deduction</b>					0
<b>Net Amount</b>					1734

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 DEPARTMENT

Circle No. XIII Voucher No. 440 Dated 1/3/09 To 7/03/09

MUSTER ROLL NO. 506

(From 1/3/09 To 7/03/09)

In continuation of Muster Roll No. 440

PART-NOMINAL-ROLL

Accountant (HG),

CHIEF MEDICAL OFFICER

S.No.	Name, Father's/Husband's Name & Address grouped according to classes	Designation	Dates From..... To.....																															Total	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		Rs.	P.			Rs.			
1	Smt Nittala Sro Nalasa Chavhan Pp 2-3576 Kattamudasaik Puz N.D.	S.M.	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	0664	142.86	0867-00	Rs. P. Rs.
2	Vikram S. S. Singh	D/W S.R.	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	6400	-/-	0867-00	Rs. P. Rs.
3	Nithin Sro Smt Prakasa	-/-	A	A	A	A	A	A	A	A	A	A	A	A	A	A	A	A	A	A	A	A	A	A	A	A	A	A	A	A	A	A	A	A	A	A	A	A	NIC -/-	NIL -	NIL -	Rs. P. Rs.
	Daily Total		S	S	S	S	S	S	S	S	S	S	S	S	S	S	S	S	S	S	S	S	S	S	S	S	S	S	S	S	S	S	S	S	S	S	S	S	12 dgs	G. Total	1734-00	Rs. P. Rs.

Reason for absence: 6/12/08  
Entry in page no. 46  
Serial No. 1263

Accountant (HG) APRAPH  
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.

Released for SR. AO (1/11/08)

Sign. or thumb impression of payee and dated initials of paying officer made at the time of payment  
Smt Nittala  
1/3/09

Grand Total of this Muster Roll ...  
Deduct: Payment made, as per details transferred to Register of Unpaid Wages Rs. 1859.00  
Total amount paid (in words) Rupees. Rs. 1734-00 Balance Paid