NEW DELHI MUNICIPAL COUNCIL

Payer's Copy

SR. NO. E

164800

RECEIPT

Receipt No.: CH091005NDMC006278 **Date:** 06-May-2009

Demand Number: 158111 **Field:** PUBLIC HEALTH ACCOUNTS BRANCH

Sub-Field: (PUBLIC HEALTH) HEALTH GENERAL BRANCH **Function:** Public Health

Functionary: NDMC **Received From:** Y.P. Malik (S.I) Circle No. 10

On Account of: On account of Sh. Sumit S/o Azad D/ws Circle No. 10 for the month of march-2009, vide vr. No. 44/RH dated: 15.04.09, Rs. 289/-

Address: Y.P. Malik (S.I) Circle No. 10

Account Code	Description	Amount
3202027	MECH.OF GARBAGE REMOVAL	289

Payment Mode: Cash **Total Amount:** 289

Total Amount in Words: Two Hundred And Eighty Nine Rupees Only

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

Name of the Operator: kusum lata **Counter No:** 1

NDMC

नई दिल्ली नगर पालिका परिषद

Signature of Authorised Officer

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

HEALTH DEPARTMENT

Sheet-I

MUSTER ROLL NO. 516 (From 1/3/09 To 20/3/09)

Circle No. I Voucher No.

In continuation of Muster Roll No. 463

PART-NOM

Signature of Authorised Officer

MEDICAL OFFICER

NEW DELHI MUNICIPAL COUNCIL
RECEIPT IS SUBJECT TO REALISATION OF CHEQUE/DRAFT/PAY ORDER.

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.	Signature or thumb impression of payee and dated initials of paying officer made at the time of payment
7.	Sh. Ravi S/o Sh. Babu Lal C-17 Balika Gram Bangla Sahib N.D.	Daily wages S/K	S	P P P	P P P	P P P	P P P	P P P	S	P P P	P P	A	P P P	P P P	S	P P P	P P P	P P P	P P P	P P P	P P P	P												16 d/p	142+C.A	2313-00	
8.	Sh. Ajay S/o Sh. Harish Chand E-42 Delhi Road N.D.	D/W	S	P P P	P P P	P P P	P P P	P P P	A	S	P P	P P	H	P P P	P P	A	S	A	A	A	A	A												10 d/p	do	1445-00	
9.	Sh. Sunil S/o Sh. Sat Pal 8-13 Ranjeet Nagar N.D.	D/W	S	P P P	P P P	P P P	P P P	P P P	S	P P	P P	H	P P P	P P P	S	P P P	P P P	P P P	P P P	P P P	P P P	P												17 d/p	do	2457-00	
10.	Sh. Anil S/o Sh. Bir Pal Amat Ram Dairy R.K. Puram N.D.	D/W	S	A	A	P P P	P P P	P P P	A	S	A	A	A	A	A	S	A	A	A	A	A	A												03 d/p	do	434-00	
11.	Sh. Sumit S/o Sh. Azad C-32 Kidwai Nagar N.D.	D/W	S	P P	A	A	A	P P	A	S	A	A	A	A	A	S	A	A	A	A	A	A												02 d/p	do	289-00	
12.	Sh. Akshay S/o Sh. Azad H.No-147 Pehlad Pur N.D.	D/W	S	P P P	P P P	P P P	P P P	P P P	S	P P P	P P P	P P P	P P P	P P P	S	P P P	P P P	P P P	P P P	P P P	P P P	P P P												17 d/p	do	2457-00	
	Net Payable Rs. 23,849-00	Daily Total	S	11	15	15	12	9	S	10	10	9	10	10	9	S	8	9	9	9	9													165 Days	G. Total	23849-00	
		Initials of person marking the daily attendance	S	R	A	A	A	A	S	R	A	A	A	A	S	R	A	A	A	A	R																	
		Initials of Inspecting Officer																																			

Pay Rs. 23,849-00 (Rupees Twenty three thousand Eight Hundred Forty Nine only)

Grand Total of this Muster Roll ... Rs. P.

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

Balance Paid

Accountant (HG) AAO (PH) 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.

CANCELLED

VERIFIED CHEQUE PAYMENT

All the Signatures, from Sr. No. 01 to 12 except Sr. No. 11 of Sumit S/o Azad are fully attested & fully paid Bill has been deposited Salary of Sr. No. 11 of Rs 289/- in N.D.M.C. Treasury, vide challan No 158 11 dt 6/5/09.

O.O No:- 554/D/ CMO/ HQ Dt. 17/12/08

(12) Clerk wager 8/K, L/B @ 142/-

(H1) Total sheet = 2.

HEALTH DIPARTMENT

MUSTER ROLL NO. 576 From 1/3/09 To 20/3/09

Circle No. X Voucher No. ..... Dated .....

In continuation of Muster Roll No. 463

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
1.	Sh. Deepak s/o Sh. Sat Pal Old Seelampur Ajit Nagar N.D.	Daily wages S/K	S P P P P P P S P P P P P P S P P P A P

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.