HEALTH DEPARTMENT

Sheet-4

MUSTER ROLL NO. 539. (From 1/4/09. To 30/4/09.)

Circle No. IV Voucher No. Dated

In continuation of Muster Roll No. 470 483 54/H

PART-NOMINAL-ROLL 12/5/09

Accountant (HG). CHIEF MEDICAL OFFICER

S.No.	Name, Father's/Husband's Name & Address grouped accrding 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. Vinod Kumar S/o Sh. Sukhbir Singh H, Balmiki Sadan mandir marg New Delhi - 110001.	Dhw Sk.	P P P P S (AA) P P P P P P P P S (AA) P P P P P P P S P P P P S P P P P P	23		3531=00	
22.	Sh. Naresh Kumar S/o Sh. Balbir Singh 16, Balmiki Sadan mandir marg. N. Delhi — 01.	"	P P P P S P P P P P P P P S P P P P P P P S P P P P S P P P P P	26		3992=00	
23.	Smt Veena W/o Sh Chand Kr. 93, Balmiki Sadan mandir marg N. Delhi	"	P P P P S P P P P P P P P S P P P P P P P S P P P P S P P P P P	26		3992=00	
24.	Smt Sanjay W/o Sh Vinod S-30, Ali Ganj. New Delhi —	"	P P P P S P P P P P P P P S P P P P P P P S P P P P S P P P P P	26		3992=00	
25.	Sh. Surender Kumar S/o Sh. Raghubir Singh M-41, Mansarover Park Shahdara Delhi —	"	P P P P S P P P P P P P P S P P P P P P P S P P P P S P P P P P	26		3992=00	
26.	Sh. Nanak Chand S/o Sh. Hari Chand 42, L.B. Sadan Delhi — 09		S S S P P P P P P P P

HEALTH DEPARTMENT

Sheet-3

MUSTER ROLL NO. 539. (From 1/4/09. To 30/4/09.)

Circle No. IV Voucher No. ..... Dated .....

In continuation of Muster Roll No. ~~470~~ 483

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 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. Amit S/o Sh. Amarsingh 2245, Type-II. Lodhi Road - Delhi	D/C Gr.	P P P P S P P P P P P S P P P P P S P P P P P S P P P P P S P P P	26	B/F 356 Days @ 152-00 TCA	3992=00 B/F 54657=00	3576 Sig All 10
17	Sh. Sunny S/o Sh. Ramesh Chand F-45, Balmiki Ladaw mandir marg - Delhi	"	P P P P S P P P P P P S P P P P P S P P P P P S P P P P P S P P P	26		3992=00	Sig All 10
18	Sh. Rajesh S/o Sh. Omprakash 33, Balmiki Sadan mandir marg - N. Delhi	"	P P P P S A P P P P P S P P P P A S A P P P P S P P P P P S P P P	23		3531=00	3180 Sig All 10
19	Sh. Sumit S/o Sh. Jai prakash 12, D/s, Qwalia Bisthani Raj Lane - N - Delhi	"	P P P P S P P P P P P S P P P P A S A P A P P S P P P P P S P P P	23		3531=00	Sumit Sig All 10
20	Sh. Sanjay S/o Sh. Ramprasad Add: A-183, Tigrikhan Rly - Delhi-62	"	P P P A S A A A A P P S P P P P P S P P P P P S P P P P P S P P P	21		3224=00	Sanjay Sig All 10
	Daily Total		19 18 17 17 S 16 18 18 16 20 19 S 18 20 20 17 19 18 S 16 18 19 18 19 20 S 19 20 20 20	G. Total			
	Initials of person marking the daily attendance		h h h d S h h d d h S h h h h h S h h h h h S h h h S	C/O 475 Days		C/O Rs. 72927=00	
	Initials of Inspecting Officer		h S S h S				

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.

Sanitation Officer Chief Sanitation Inspector

HEALTH DEPARTMENT

Sheet-II

MUSTER ROLL NO. 539. (From 1/4/09. To 30/4/09.)

Circle No. IV Voucher No. Dated.

In continuation of Muster Roll No. ~~470~~ 483

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 Rs. P.	Amount Rs. P.	Sign. or thumb impression of payee and dated initials of paying officer made at the time of payment
11	Sh. Manoj Kumar S/o Sh. Kumeshkar D/o 107, Balmiki Basti Mandir marg Delhi-01	Sk.	P P P P S P P P P P P S P P P P P S P P P P P S P P P P S P	26		3992=00	
12	Sh. Sunil Kumar S/o Sh. Madanlal 848, H.S. Road Bapa Nagar Delhi-	"	P P P P S P P P P P P S P P P P P S P P P P P S P P P P S P	26		3992=00	
13	Sh. Pradeep S/o Sh. Sumer Singh 315, Shah pur Jatt Delhi-	"	P P P P S P P P P P P S P P P P P S P P P P P S P P P P S P	25		3838=00	
14	Sh. Akash S/o Sh. Jai Kishan S, Manav Bhawan 100 Delhi-02	"	A P P P S P P P P P P S P P P P P S P P P P P S P P P P S P	25		3838=00	
15	Sh. Amit Kumar S/o Sh. Vinod Kr. 2/603, Block-A/2, Resident Colony Bhalswa Dairy Delhi-42	"	P P P P S P P P P P P S A A A P P S P P P P P S P P P P S P	23		3531=00	
	Daily Total		19 13 12 13 S 13 14 14 12 15 14 S 13 15 15 12 14 15 S 13 13 14 14 14 15 S 14 13 15 15		G. Total		
	Initials of person marking the daily attendance		L L L L S L L L L L L S L L L L L L S L L L L L L S L L L L	Cp 38 Days Cp 08		54657=00	
	Initials of Inspecting Officer		S S S S				

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

Rs.	P.

HEALTH DEPARTMENT

Sheet-I

MUSTER ROLL NO. 539. (From 1/4/09. To 30/4/09.)

Circle No. IV Voucher No. ..... Dated .....

In continuation of Muster Roll No. ~~470~~ 483.

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 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
06	Sh. Akash s/o Sh. Brijpal 38, Bhandawali Fazalpur Delhi-	Safai Sk.	P P P P S P P P P P P S P P P P P S P P P P P S

O.O. Nos. - D/83/CMO/HQ Dt. 18/2/09.

(26) Clarify wages Sl. 4/B @ 142+CA.
(174) To all sheets 5

HEALTH DEPARTMENT

MUSTER ROLL NO. 539. (From 1/4/09. To 30/4/09.)

Circle No. IV Voucher No. ..... Dated .....

In continuation of Muster Roll No. ~~483~~ 483

PART-NOMINAL-ROLL

Accountant (HG), CHIEF MEDICAL OFFICER

S.No.	Name, Father's/Husband's Name & Address grouped accoording 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
01.	Smt Nirmala W/o Sh Jagdish 1959, Village - Pillanji Kotla Mubarak Pur Delhi-03.	S/w Sc	P P P A S P P P P P S P P P P P S P P P P P A S P P P P P S P P P	24 days	@ 152-00 +CA	3685=00	
02.	Smt Urmila W/o Sh Sri Chand A-184, J.J. Colony Wazeer Pur Delhi—	"	A H H S P P H H P P S P P P H P P S P P P P P S P P P P P S P P P	20		3071=00	
03.	Sh. Krishan S/o Sh Shanker F-43, Balmiki Sadan Mandir marg Delhi-01	L	P P P S P P S P P P S P P P P P S P P P P P S P P P P P S P P P	26		3992=00	
04.	Smt Santosh W/o Sh. Mukesh 1570, Inder Basti Kotla Mubarak Pur - Delhi-03.	"	P P P S A P P P S A P P P S A P P P S A P P P S A P P P S A P P P	20		3071=00	
05.	Smt Saroj W/o Sh Prem. D-15, Palika Dham. Tale mkt. N. Delhi.	"	P P P S P P P P S P P P P S P P P P S P P P P S A P P P P S P P P	25		3838=00	
	Daily Total		4 5 3 4 5 4 5 4 3 5 5 5 5 5 3 5 5 4 4 5 5 5 5 5 5 3 5 5		G. Total		
	Initials of person marking the daily attendance						
	Initials of Inspecting Officer		S S S				

Pay Rs..... (Rupees.....)

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

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

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

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.