

HEALTH DEPARTMENT

Sheet-II

MUSTER ROLL NO. 530

Circle No. 1 Voucher No. 523 Dated 1/4/09 To 30/4/09

In continuation of Muster Roll No. 528 4114 5/09

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								
11	Rejker-510 Komern- Abd-e-460 Wazirpur		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	26	Rs. 151445.99	for 26 days	<i>[Signature]</i>
12	Smt. Mayrao Rajkumar Abd-B-110 Saraykhler- Komakher Bari		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	33	Rs. 1996.50	for 33 days	<i>[Signature]</i>	
13	Sikandar Khan Bachan- Abd-372 Caroli Nkr Dem-		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	24	Rs. 209685	for 24 days	<i>[Signature]</i>	
14	Redeepsio Dilberg- Abd-T-615 Gulistan-21 Bady-ET NR		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	24 days	Rs. 3685.00	for 24 days	<i>[Signature]</i>	
Net Payable Rs. 5174300																																									
		Daily Total																																							
		Initials of person marking the daily attendance																																							
		Initials of Inspecting Officer																																							

13

Pay Rs. 5174300 (Rupees) Five one thousand seven hundred forty three only

CANCELLED

Accountant (HG) AAO (HT) M.O.H.

Certified that the workers mentioned in the muster roll were actually employed by me on NDMC work(s) and for payment they were actually paid on my identification in my presence.

Sr. A.O. Adhikari

Grand Total of this Muster Roll ...

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

Rs. 5174300 Paid and Sign attached

Rs. 5174300 Paid and Sign attached

VERIFIED FOR CASH/CHEQUE PAYMENT

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

HEALTH DEPARTMENT

MUSTER ROLL NO.

Sheet-I

Circle No. 550 Voucher No. 593 Dated 1/4/09

In continuation of Muster Roll No. 550 (From 1/4/09 To 30/4/09)

PART-NOMINAL-ROLL

S.No.	Name, Father's/Husband's Name & Address grouped according to classes	Designation	Dates From To																															Daily Total	Initials of person marking the daily attendance	Initials of Inspecting Officer
			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			
6	Radish Mrs D Kamath Chert - Aho - 4/4g Bahadramth		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	26		
7	Ranvir Sindhio Behisgim - Aho - G.P.10 Bahadur-nemvya		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	26			
8	Smt. Kamlesh V D Bhek - Aho - G. B Yusuf Semvya		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	26				
9	Smt. Geeta D D Penepet - Aho - B. Baper Holumhikala		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	26				
10	Sh. Sandesh D Brom Pelt - Aho - D - 25r Calidut		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	26				
			G. Total																															425		

Accountant (HG) (Rupees)
 Sr. A.O.
 Grand Total of this Muster Roll ...
 M.O.H.
 Pay B.
 1986
 50 (HG)

Accountant (HG)
 Sr. A.O.
 Grand Total of this Muster Roll ...
 M.O.H.
 Sr. A.O.
 Deduct-Payment made, as per details transferred to Register of Unpaid Wages
 Balance Paid

Rs. P.

Accountant (HG)
 CHIEF MEDICAL OFFICER

Sign. or thumb impression of payee and dated initials of paying officer made at the time of payment

[Handwritten signatures and stamps, including a circular stamp with 'SANDESH' and other illegible text]

[Handwritten notes at top left corner]

[Handwritten notes at bottom left corner]

HEALTH DEPARTMENT

MUSTER ROLL NO. 550

(From 01/04/09 To 30/4/09)

(14) daily wages 812.418 @ 154-04.
(18) 20-01-08-03.

Circle No. I Voucher No. 583 Dated 01/04/09

PART-NOMINAL-ROLL

Accountant (HG) S

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				
(1)	Smt. Anny 2109-etc- Abn-155 P.K. Road-		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	26 days	
																																				26 days	
(2)	Smt. Suning 2105HishPat- Abn-880any Road- X-10-		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	26 days		
																																				26 days	
(3)	Smt. Anjaly 2112 NIKAY- Abn-X-10 Adhalek Chundli's		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	26 days			
																																				26 days	
(4)	Smt. Anjaly 510 Komliskun- Abn-61234 Durin Puri		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	26 days			
																																				26 days	
Daily Total																																					
Initials of person marking the daily attendance																																					
Initials of Inspecting Officer																																					

Pay Rs. (Rupees)

Grand Total of this Muster Roll ...

Accountant (HG) M.O.H.

Sr. A.O.

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

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.

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

Rs. P.