SL No 24
P-23

Can. Re

Contingent Bill Number : 30309091000021

Disbursement Type: Cash

Bill Type: ImprestBills

Fund: NDMC Municipal General Fund

Bill Date: 07-Sep-2009

Segment: GENERAL FUND

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: 12-Jan-2009

SanctionDetails: Office Order No. D-203/CMO(HQ) dated: 18.05.09 vide approval of Chairman No. 171/D/PS dated: 12.01.09

Bill Status: CREATED

Narration: Payment 20 daily wagers S/K in circle No. -05 w.e.f. 01.08.09 to 31.08.09 @Rs151+CA per day

158/M
23/9/09

Remarks:

Code	Payable To	Function	Account Code	Account Head	Amount
		Public Health	2308003	GARBAGE REMOVAL CLEARANCE	28095
				Gross Amount	28095

Deductions:

Code	Payable To	Function	Account Code	Account Head	Amount
				Total Deduction	0
				Net Amount	28095

Net Payable in Words :

Created By	neelam.uniyal	**Verified By**	
Confirmed By		**Approved By**	
Final Approved By			

158/H
23/9/09

Sheet-III

HEALTH DEPARTMENT

MUSTER ROLL NO. 744 (From 1/8/09 To 16/8/09)

Circle No. V Voucher No. ..... Dated .....

In continuation of Muster Roll No. 695

Accountant (HG) — CHIEF MEDICAL OFFICER

PART-NOMINAL-ROLL

S.No.	Name, Father's/Husband's Name & Address grouped acccrding 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. Harichand S/o Chhotey Lal H.No-16/354 Trilokpuri Del-91	DTW Sk.	P S P P A A P P S P P P A P H S	10 days		1535=00	Sig Attd
17.	Sh. Deepak Kr S/o Videshi H.No. 5/6, Bapudham Chanakyapuri N.D-21	— do —	P S A P P P P P S A P P A P H S	10 days		1535=00	Sig Attd
18.	Sh. Mahesh S/o Suresh H-No-B-23. Palikadlam Gole Mkt N.D-1	— do —	P S P P P P P P S P P P P P H S	13 days		19962=00	Sig Attd
19.	Sh. Anil Kr S/o Jaipal H.No-10/139 Bapudham Chanakyapuri N.D-21	— do —	P S P P P P P P S P P P P P H S	13 days		19962=00	Sig Attd
20.	Smt. Sheela W/o Ramavtar H.No-86. Bathavi Rajlane Khan Mkt N.D-1	— do —	P S P P P P P P S P P P P P H S	13 days		19962=00	Sig Attd
		Daily Total	15 S 11 16 11 12 14 13 S 14 16 15 13 14 20 S	183 days	G. Total	28095=00	
		Initials of person marking the daily attendance	E S E E E E E E S E E E E E E H S				
		Initials of Inspecting Officer	S S S S				

Net Payable Rs 28095.00

Recd. on 3/9/09 Entry has been made on Page 56 at Sr.No. 1509. SO(H.G) 3/9/09

Pay Rs. 28095-00 (Rupees Twenty eight thousand ninety Five only)

CANCELLED 18/9/09 AO(PH) Released for Payment M.O.H.

Accountant (HG) AAO (PH) 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.

VERIFIED FOR CASH/CHEQUE PAYMENT

Serial No. 1 to 20 are thumb and sign attested and Roll Paid fully

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

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

H-128 SI (V) 30/9/09

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

HEALTH DEPARTMENT

Sheet II

MUSTER ROLL NO. 744 (From 1/8/09 To 16/8/09)

Circle No. V Voucher No. ..... Dated .....

In continuation of Muster Roll No. 695

PART-NOMINAL-ROLL

Accountant (HG) CHIEF MEDICAL OFFICER

S.No.	Name, Father's/Husband's Name & Address grouped acccrding 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
11.	Smt. Madhu w/o Rajinder H.No-C-22. Palikadham N.D.-1	D/W SK	D S D D D A A A S D D D D D H S D D D D D D D D D D D D D D D D		8 days today		1535-00	Sign attested
12.	Sh. Satishkr s/o Chander Pal H.No-H-14. Palikadham N.D.-1	—	A S A D A A D A S D D D A A H S D D D D D D D D D D D D D D D D		06 day		921-00	Sign attested
13.	Sh. Rakesh Rana s/o Suresh H.No-B.23. Palikadham Gole mkt. N.D.-1	—	A S A A A A A S A A A A A H S		Abill.			
14.	Sh. Bijender s/o Jaikishan H-No-Q-1/19 Mangolpuri Delhi-83	—	D S D D A A D D S A D A D A H S D D D D D D D D D D D D D D D D		08 days		1228-00	Sign attested
15.	Sh. Pramod s/o Hukam Chand H.No-48. CWC. N.D.M.C. Flat Sarojani Nagar N.D.-23	—	D S A D D D D D S D D D D D H S D D D D D D D D D D D D D D D D		12 days		1842-00	Sign attested
	Daily Total		10 9 7 11 7 8 9 8 5 10 11 10 10 9 8 S		124 days	G. Total	10037-00 / 10017-00	
	Initials of person marking the daily attendance							
	Initials of Inspecting Officer							

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 ... ... Rs. P.

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

Sheet-I

HEALTH DEPARTMENT

MUSTER ROLL NO. 744 (From 1/8/09 To 16/8/09)

Circle No. V Voucher No. ..... Dated .....

In continuation of Muster Roll No. 695

Accountant (HG) CHIEF MEDICAL OFFICER

PART-NOMINAL-ROLL

S.No.	Name, Father's/Husband's Name & Address grouped acccrding 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
6.	Sh. Nitin S/o Amar Singh H.No-31/380 Prem Nagar Lodhi Colony Delhi-3.	Daily Wager Sk	A A A A A A A A A P P P P P H S	04 days		6142=00	
7.	Sh. Om Prakash S/o Mahadev H.No-21/C Railway Colony Narella Delhi-40	do	P S P P P P P P S P P P P P H S	13 days		19962=00	
8.	Sh. Pawan Kr S/o Rajiv H.No-C-22. Palika Dham Gale mkt. N.D-1	do	P S P P P P P P S P P P P P H S	13 days		19962=00	
9.	Sh. Ramesh S/o Ramprasad H.No-129. Balmiki Sadan Mandir marg N.D-1	do	P S P P P P P P S P P P P P H S	13 days		19962=00	
10.	Sh. Rajinder Singh S/o Om Prakash H.No-K-606 Dakin Puri Delhi-62	do	P S P P P P P P S P P P P P H S	13 days		19962=00	
	Daily Total		7 S 5 7 5 7 6 6 5 7 7 7 7 7 H S	88 days	G. Total	Rs 13511-00 13494=00	
	Initials of person marking the daily attendance		E S E E E E E E S E E E E E H S				
	Initials of Inspecting Officer		R S R S R H S				

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

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

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.

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

O.O. No:- D/203/CMO/HQ Dt. 18/5/09

(20) daily wages SK, HB @ 151+CA per day

(173) = 4 sheet

HEALTH DEPARTMENT

MUSTER ROLL NO. 744 (From 1/8/09 To 16/8/09)

Circle No. V Voucher No. ..... Dated .....

In continuation of Muster Roll No. 695

PART-NOMINAL-ROLL

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
1.	Sh. Anil Kr son Sitichand H.No-5/269, Tilak Puri Delhi-92.	Hwager Sk.	D P S D P D P A A A A S P P A P P A A H S		06 days		921=00	
2.	Sh. Jaikishan S/o Bhagwandass H.No 34, Harijan Basti Mandir marg N.D.	do	A S A P P A P P P P A S P P P P A A H S		06 days		921=00	
3.	Sh. Ajay S/o Raj Pal H.No-94 Balmiki Basti Mandir Marg N.D-1	do	A S A A A A A A S A A A A A H S		Mill.			
4.	Sh. Rajkamal S/o Ramesh Kr H.No-197, Balmiki Basti Mandir marg N.D.	do	D P S A P A P A P S D P P A P D H S		09 days		1382=00	Rajkamal
5.	Sh. Vinay S/o m Harish Kr H.No-D-15, Palikadham Gale mkt. N.D-1	do	D P S A D P D P D P D P S A D P D P D P D H S		11 days		1689=00	
							4813=00	
	Daily Total		0 S 1 4 1 3 2 2 S 3 3 2 2 2 0 S		39 days	G. Total	4893=00	
	Initials of person marking the daily attendance		E S E E E E E E S E E E E E H S					
	Initials of Inspecting Officer		S S S 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

Rs.	P.