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**Contingent Bill Number :** 30309091000012

**Disbursement Type:** Cash**Bill Type:** ImprestBills**Fund:** NDMC Municipal General Fund**Bill Date:** 04-Sep-2009**Segment:** GENERAL FUND**Sub Segment:** CASH IN HAND**Field:** PUBLIC HEALTH ACCOUNTS BRANCH**Sub Field:** (PUBLIC HEALTH) ANTI MALARIA SURV**Functionary:** DIRECTOR (PH)**Payable To:** Secretary, NDMC**Sanction By:** Chairman**Sanctioned On:** 26-Nov-2008**SanctionDetails:**Office Order No. D-1295/CMO(MAL)  
dated: 28.05.09 vide approval of  
Chairman dated: 26.11.08**Bill Status:** CREATED**Narration:** Payment 07 daily wagers A.M.G(M)  
in circle No. -01 w.e.f. 01.08.09 to  
19.08.09 @Rs151+CA per day**Remarks:**

*34/11*  
*11/9/09*

Code	Payable To	Function	Account Code	Account Head	Amount
		Public Health	2308043	ANTI MALARIA OPERATION	17039
<b>Gross Amount</b>					17039

**Deductions:**

Code	Payable To	Function	Account Code	Account Head	Amount
<b>Total Deduction</b>					0
<b>Net Amount</b>					17039

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>			



O.O.No: 1895/Chol mal D. 28/5/05.

# HEALTH DEPARTMENT

**MUSTER ROLL NO.** 754

(From 1/8/05 To 19/8/05)

①7 classify wages A.M.G. @ 151+CA per day  
①71 = 28/24

Circle No. C.M.T. Voucher No. 706 Dated .....

**PART-NOMINAL-ROLL**

S.No.	Name, Father's/Husband's Name & Address grouped according to classes	Designation	Dates From..... To.....																															Total	Rate Rs.	Amount Rs.	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	Sunil Kumar s/o Ramesh Chand 17/301 Tolok Puri Delhi - 110091	D.W AMC	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	16	151+CA	2456=00	<i>Sunil Kumar</i>	
2	Rajpu s/o Sh. Heera Lal 7184 Khichan Puri Delhi - 110091	"	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	16	"	2456=00	<i>Rajpu</i>	
3	Tarig Chand s/o Sh. Ram Lal 425 Kadkad Barga Indrapuri Delhi - 110092	"	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	16	"	2456=00	<i>Tarig Chand</i>	
4	Raj Kumar s/o Sh. Fakir Chand 158 Mandir Marg Balmiki Basti Delhi-	"	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	15	"	2303=00	<i>Raj Kumar</i>	
5	Vikash s/o Sh. Ram Prakash 22C Kalpana Sec 5 Vaishali C. Bad. UP	"	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	16	"	2456=00	<i>Vikash</i>	
	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	79	G. Total	12127=00	

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

Accountant (HG)

CHIEF MEDICAL OFFICER

Accountant (HG)

M.O.H.

Sr. A.O

Grand Total of this Muster Roll ...

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

Rs. P.

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.