

SL No. 5
Date 10.6.6

con

91/11
15/9/09

Contingent Bill Number : 30309091000122

Disbursement Type: Cash
 Fund: NDMC Municipal General Fund
 Segment: GENERAL FUND
 Field: PUBLIC HEALTH ACCOUNTS BRANCH
 Functionary: DIRECTOR (PH)
 Sanction By: Chairman
 SanctionDetails: Office Order No. D-1295/CMO(MAL) dated: 28.05.09 vide approval of Chairman dated: 26.11.08
 Narration: Payment 09 daily wagers A.M.G(M) in circle No. -02 w.e.f. 01.08.09 to 19.08.09 @Rs151+CA per day
 Remarks:

Bill Type: ImprestBills
 Bill Date: 14-Sep-2009
 Sub Segment: CASH IN HAND
 Sub Field: (PUBLIC HEALTH) ANTI MALARIA SURV
 Payable To: Secretary NDMC
 Sanctioned On: 26-Nov-2008
 Bill Status: CREATED

Code	Payable To	Function	Account Code	Account Head	Amount
		Public Health	2308043	ANTI MALARIA OPERATION	21644
Gross Amount					21644

Deductions:

Code	Payable To	Function	Account Code	Account Head	Amount
Total Deduction					0
Net Amount					21644

Net Payable in Words :

Created By	neeiam.uniyal	Verified By	
Confirmed By		Approved By	
Final Approved By			

D-0: N-1: D/1925/CMO/110 ST-28/5/59 HEALTH DEPARTMENT

MUSTER ROLL NO.

From 1/8/59 To 19/8/59
 (1A) = 2nd Sheet
 (09) Daily wages Arno @ 15/- per day

Circle No. Med-11 Voucher No. 708 Dated 15/9/59

In continuation of Muster Roll No. 708 PART-NOMINAL-ROLL
 ACCOUNTANT (HG) V.S. CHIEF MEDICAL OFFICER [Signature]

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	श्री अरजुन शं. अरजुन शं. कल्याण	T.M.R																																16 days	15/-	2456/-	[Signature]
2	श्री अरजुन शं. अरजुन शं. कल्याण																																	16 days	15/-	2456/-	[Signature]
3	श्री अरजुन शं. अरजुन शं. कल्याण																																	16 days	15/-	2456/-	[Signature]

VERIFIED FOR CASH/CHEQUE PAYMENT
 Head Cashier: [Signature]

Net Payable Rs. 21,644-00
 Initials of person marking the daily attendance
 Initials of Inspecting Officer
 Pay Rs. 21,644-00
 Paid in full s.no 1 to 9 attached

Accountant (HG) V.S. 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.

Gross Total of this Muster Roll ...
 Multiple payment made, as per details transferred to Register of Unpaid Wages

HEALTH DEPARTMENT

MUSTER ROLL NO. 756

Circle No. Med-II Voucher No. 708 Dated 19/8/09

From 1/8/09 To 19/8/09

PART-NOMINAL-ROLL

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	श्री एलु विरट्टे 8/0 श्री श्याम चारा फा. - E 64/4 विजय निवासे शेट्टी केश II फेवरी 85	(A.M.G.) T.M.R	P	S	P	P	P	P	P	S	P	P	P	H	S	P	P	P	P																	16 days	15175	2456-00	<i>[Signature]</i>
②	श्री सतीश कुमार 8/0 श्री तारा राम फा. - 50/B लिटिल रोड श्री 52 फेवरी 83	"	P	S	P	P	P	P	P	S	P	P	P	H	S	P	P	P	P																	16 days	-do-	2456-00	<i>[Signature]</i>
③	श्री श्रीमती 8/0 श्री राम विशाल फा. नं. 148 तीर्थमठ सायल श्री. 48 फेवरी 85	"	P	S	P	P	P	P	P	S	P	P	P	H	S	P	P	P	P																	16 days	-do-	2456-00	<i>[Signature]</i>
④	श्री श्रीमती 8/0 श्री राम शंकर फा. N 793 मोहन प्रसाद, कोलार् फेवरी 83	"	P	S	P	P	P	P	P	S	P	P	P	H	S	P	P	P	P																	16 days	-do-	2456-00	<i>[Signature]</i>
⑤	श्री राजेश 8/0 श्री राम अच्युत फा. नं. 86 कल रोड शिव शिव कोलार् फेवरी 85	"	P	S	P	P	P	P	P	S	P	P	P	H	S	P	P	P	P																	80 days	G. Total	12280-00	<i>[Signature]</i>

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

Accountant (HG)
 CHIEF MEDICAL OFFICER

Rs.	P.
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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.