Contingent Bill Number : 30309091000023

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) 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 14 daily wagers A.M.G(M) in circle No. - 7 & 8 w.e.f. 01.08.09 to 19.08.09 @Rs151+CA per day
Remarks:

49/n
11/9/09

Code	Payable To	Function	Account Code	Account Head	Amount
		Public Health	2308043	ANTI MALARIA OPERATION	33003
			Gross Amount		33003

Deductions:

Code	Payable To	Function	Account Code	Account Head	Amount
			Total Deduction		0
			Net Amount		33003

Net Payable in Words :

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

Sheet-II

HEALTH DEPARTMENT

MUSTER ROLL NO. 760 (From 1/8/09 To 19/8/09)

Circle No. Mal 798 Voucher No. 49/H Dated 11/9/09

In continuation of Muster Roll No. 712

Accountant (HG) CHIEF MEDICAL OFFICER

PART-NOMINAL-ROLL

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
																																		15 Days		Rs 33,179=00	
11	मुकेश S/o श्री पाल चन्द्र G-16 पृथ्वी राज लेन खान मार्केट, नई दिल्ली 03	AMG TMR	P	S	P	P	P	P	P	P	S	P	P	P	P	P	H	S	P	P	P													16 Days	154/-	2456=00 Paid	NS
12	रविन्द्र S/o श्री जयपाल सिंह A-132 ज्वाला पुरी, कैम्प नं०-4 नांगलोई नं० दि०-87	AMG TMR	P	S	P	P	P	P	P	P	S	P	P	P	P	P	H	S	P	P	P													16 Days	154/-	2456=00 Paid	Lovinder Kumar NS
13	राजकुमार S/o श्री ओमप्रकाश J-123 दक्षिण पुरी नई दिल्ली-62	AMG TMR	P	S	P	P	P	P	P	P	S	P	P	P	P	P	H	S	P	P	P													16 Days	154/-	2456=00 Paid	Rajkumar NS
14	अम्बिका S/o श्री राजनाथ सिंह F-9, बी० के० दत्त कॉलोनी नई दिल्ली-03	AMG TMR	P	S	P	P	P	P	P	P	S	P	P	P	P	P	H	S	P	P	P													16 Days	154/-	2456=00 Paid	Ambika NS
	Net Payable Rs 33003=00																																	215 Days ~~231 Days~~ 215 Days	G. Total	33003=00	
	Daily Total																																				
	Initials of person marking the daily attendance		J.N		J.N	J.N	J.N	J.N	J.N	J.N		J.N	J.N	J.N	J.N	J.N	J.N			J.N	J.N																
	Initials of Inspecting Officer																																				

Received on 31/8 Entry has been made at Page 55 Sr. No. 1500 Accounts S.O. (H.Q) 31-8-09

Pay Rs. 33003=00 (Rupees Thirty three thousand & three only)

Voucher 49/H dt 11/9/09 Fully Paid Mayeet Singh 29/9/09

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

Accountant (HG) AAO (PH) M.O.H. Sr. A.O

CANCELLED Jaiswal AO (PH)

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

Balance Paid

Sheet-I

HEALTH DEPARTMENT

MUSTER ROLL NO. 760 (From 1/8/09 To 19/8/09)

Circle No. Mal 7&8 Voucher No. ..... Dated .....

In continuation of Muster Roll No. 712.

Accountant (HG) CHIEF MEDICAL OFFICER

PART-NOMINAL-ROLL

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
				80 Days	151+CA	12,280=00	
6	अशोक वर्धन S/o श्री सुरेन्द्र कुमार F I/11 दक्षिण पुरी नई दिल्ली-62	AMG TMR	P S P P P P P P S P P P P P H S P P P	16 Days	154/-	2456=00 Paid	
7	दीपक कुमार S/o श्री दयाराम M-87 शकुर पुर, जे०जे० कॉलोनी नई दिल्ली-34	"	P S P A A A A A S A A A A P H S P P P	7 Days	154/-	1075=00 Paid	Deepak
8	सुनील S/o श्री बरसातीलाल म०नं० B-521 पाँडव नगर आदीपुर डिपो, नारायणा रोड नई दिल्ली-08	"	P S P P P P P P S P P P P P H S P P P	16 Days	154/-	2456=00 Paid	Sunil
9	गोपाल S/o श्री पूरण म०नं० Q-11 श्रीनिवासपुरी प्राईवेट कॉलोनी, नई दिल्ली-65	"	P S P P P P P P S P P P P P H S P P P	16 Days	154/-	2456=00 Paid	Gopal
10	सुबेदार S/o श्री रामनिवाज सिंह म०नं० B-201 रेलवे कॉलोनी सेवा नगर, नई दिल्ली-03	"	P S P P P P P P S P P P P P H S P P P	16 Days	154/-	2456=00	सुबेदार
				151 Days	G. Total	23,179=00 Paid	
						33,456=00	
	Daily Total						
	Initials of person marking the daily attendance		NCS NCS NCS NCS NCS NCS NCS NCS NCS NCS NCS NCS NCS NCS NCS				
	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 ... ...

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

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

Rs.	P.

O.O. No:- D/1295/CMO (Mal) Dt. 28/5/09.

(16) Clerk wager A.M.G. @ 151+CA per day

(42) = 3 Sheet.

HEALTH DEPARTMENT

MUSTER ROLL NO. 760. (From 1/8/09 To 19/8/09.)

Circle No. Mal-758 Voucher No. ..... Dated .....

In continuation of Muster Roll No. 712.

Accountant (HG), CHIEF MEDICAL OFFICER

PART-NOMINAL-ROLL

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
1	सन्तराम पुत्र श्री साहबदीन म०नं०-205 ललिता पार्क लक्ष्मीनगर, नई दिल्ली-92	AMG TMR	P	S	P	P	P	P	P	P	S	P	P	P	P	P	H	S	P	P	P													16 days	154/-	2456=00	Santram Paid NCJ
2	सुनिल कुमार पुत्र श्री कालीचरण म०नं० A-56 जवाहर पार्क देवली रोड़ नई दिल्ली-62	AMG TMR	P	S	P	P	P	P	P	P	S	P	P	P	P	P	H	S	P	P	P													16 days	154/-	2456=00	सुनील कुमार Paid NCJ
3	राजेन्द्र पाल S/o श्री चौबासिंह म०नं० - B-1159 संगम विहार नई दिल्ली - 62	AMG TMR	P	S	P	P	P	P	P	P	S	P	P	P	P	P	H	S	P	P	P													16 Days	154/-	2456=00	राजेन्द्र पाल Paid NCJ
4	राजेन्द्र प्रसाद S/o श्री रामनाथ म०नं० 1884 लक्ष्मीबाईनगर नई दिल्ली-23	"	P	S	P	P	P	P	P	P	S	P	P	P	P	P	H	S	P	P	P													16 Days	154/-	2456=00	राजेन्द्र प्रसाद Paid NCJ
5	सुनिल S/o श्री राजेन्द्र 39 ओल्ड जी पॉइन्ट, काली बाड़ी लेन, गोलडाकखाना	"	P	S	P	P	P	P	P	P	S	P	P	P	P	P	H	S	P	P	P													16 Days	154/-	2456=00	सुनील Paid NCJ
																																		80 Days		12,280=00
	Daily Total																																		G. Total		
	Initials of person marking the daily attendance		N.C.J.		N.C.J.	N.C.J.	N.C.J.	N.C.J.	N.C.J.			N.C.J.	N.C.J.	N.C.J.	N.C.J.	N.C.J.	N.C.J.			N.C.J.	N.C.J.	N.C.J.															
	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 ... ...

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

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

Rs.	P.