HEALTH DEPARTMENT

Sheet-IV

MUSTER ROLL NO. 796. (From 18/8/09 To 31/8/09)

Circle No. IX Voucher No. ..... Dated .....

In continuation of Muster Roll No. Fresh 28/11 10/9/09

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 ... (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
21	Sh. Rohit S/o Ravi Kr. H.No E 17 Palika Dham New Delhi	Daily wages Sfi		21 Days 10 dys	151+ C.A.	3360 Paid 1535	2118
22	Sh. Sunney S/o Heera Lal H.No S-9 Aligarj N. Delhi	do		10 dys	do	Paid 1535	LTI
23	Sh. Sanjay S/o Sh. Jaisingh H.No 408. Income Tax Colony Pritampura	do		6 dys	do	Paid 921	21514 LTI
24	Sh. Sh. Bisu S/o Vijay Singh S-7 Palika Dham N. Delhi	do		6 dys	do	Paid 921	LTI
25	Sh. Sager S/o M. Salander. H.No 29 Prithviraj Lane Ichan met N. Delhi	do		6 dys	do	Paid 921	21122
26	Sh. Dinesh S/o	do		4 dys	do	Paid 614	18022
	Net Payable Rs 39,458-00						
		Daily Total		257 Days	G. Total	39458-00	
		Initials of person marking the daily attendance					
		Initials of Inspecting Officer					

Pay Rs. 39,458-00 (Rupees Thirty Nine thousand Four hundred fifty eight only)

Paid In full
S-Nos to 28/11 Sd/- [illegible]

VERIFIED FOR CASH/CHEQUE PAYMENT
Head Cashier

CANCELLED
A.O (H)

Accountant (HG) A.A.O (H) 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.

Date ..... Release for Payment

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.

Sanitation Officer Chief Sanitation Inspector Sanitation Inspector

Recd. on 3-9-09 Entry has been made on page 56, Sr.No 1518 SO (H.O)

04/9/09

HEALTH DEPARTMENT

Sheet-IV

MUSTER ROLL NO. 796. (From 18/8/09 To 31/8/09)

Circle No. IX Voucher No. ..... Dated .....

In continuation of Muster Roll No. Fresh.

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
16	Sh Mohit S/o Rajesh H.No Block Agatsa 35/26 Tri Lok Puri – 92	Daily wages S/k	15 15 15 15 15 15 15 15 15 15 15 15 15	162 Days	151+ C.A	24870 Paid	Mohit
			11 days			1689	
17	Sh Rakesh S/o Ishwar Dass H.No G-2 Double Story Atli Ganj N. Delhi	S/k	15 15 15 15 15 15 15 15 15 15 15 15 15	11 days	do	Paid 1689	Rakesh Kumar
18	Sh. Anil S/o Har Gyan Singh H.No J 392 Sundar Nagari – 93	S/k	15 15 15 15 15 15 15 15 15 15 15 15 15	11 days	do	Paid 1689	Anil Kumar
19	Smt Jaiwati W/o Suresh H.No D/73/A Krishna Park N. Delhi	S/k	15 15 15 15 15 15 15 15 15 15	10 days	do	Paid 1535	[illegible]
20	Smt Rajwati W/o Gulab Singh H.No. B/1/390 Sultanpuri N. Delhi	S/k	15 15 15 15 15 15 15 15 15 15	10 days	do	Paid 1535	[illegible]
	Daily Total		18 20 20 20 20 20 19 19 19 20 20	215 Days	G. Total	33011-00 Days	
	Initials of person marking the daily attendance						
	Initials of Inspecting Officer		M M M				

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.

Sanitation Officer Chief Sanitation Officer

HEALTH DEPARTMENT

Sheet II

MUSTER ROLL NO. 796 (From 18/8/09 To 31/8/09)

Circle No. IX Voucher No. ..... Dated .....

In continuation of Muster Roll No. Fresh

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
11	Smt Anita W/o Deep Singh H. No K. 1619 Dakshin Puri Delhi – 62	D/wages 9/1c	19 20 21 22 24 25 26 27 28 29 30 31	107 Days	151.+ C.A.	16,429-00 Paid	31-8-09
				11 days		1689-00	
12	Smt Ramkumari W/o Harichand H. No 103 Sec-4 R.K. Puram N. Delhi	5/1c	19 20 21 22 24 25 26 27 28 29 30 31	11 days	do	Paid 1689-00	
13	Smt Daya ~~[illegible]~~ W/o Naresh H. No 1962 Kotla Mubarakpur N. Delhi	5/1c	19 20 21 22 24 25 26 27 28 29 30 31	11 days	do	Paid 1689-00	
14	Sh. Rakesh S/o Jaipal H. No 55 Multistory Ali Ganj N. Delhi	5/1c	19 20 21 22 24 25 26 27 28 29 30 31	11 days	do	Paid 1689-00	
15	Sh. Rahul S/o Ramchandar H. No-2.9 Ali Ganj N. Delhi	7/1c	19 20 21 22 24 25 26 27 28 29 30 31	11 days	do	Paid 1689-00	
	Daily Total		15 15 15 15 15 15 14 14 14 15 15	162 Days	G. Total	94,874-00	
	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 ... ...

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

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

Rs.	P.

Sanitation Officer Chief Sanitation Inspector Sanitation Inspector

HEALTH DEPARTMENT

Sheet-I

MUSTER ROLL NO. 796. (From 18/8/09. To 31/8/09.)

Circle No. IX Voucher No. ..... Dated .....

In continuation of Muster Roll No. Fresh.

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
6	Sh. Rakesh S/o Sh. Prem Ch. H.No. D-15 Palika Dham New Delhi	Mlwagers. S/K																			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	5 days 11 days	151+ C.A	8445 1689	
7	Sh. Dharam Sich Ramanlal Juggi No. S/137/22 Ic; dwni Nagar N. Delhi	S/K																			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	11 days	do	1689	
8	Smt Puja W/o Suraj H.No 366. Shivmandir Uttam Nagar	S/K																			P P P	P P P	P P P	P P P		P P P	P P	A A A			P P P		P P P	8 days	do	1228	
9	Smt Laxmi W/o Ram Baby Juggi No 339 B.18 Indira Camp Ic Gyanpuri Delhi-9,	S/K																			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	11 days	do	1689	
10	Sh. Anil Kr S/o Sh. ~~Satish Dayal~~ H.No ~~H-1966 Old Nagal Raj Vill. Delhi Cantt.~~ Arjuna Park Delhi	S/K																			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	11 days	do	1689	
	Daily Total																				10 10 10	10 10	9 9 9	10		10	10	7 Days							G. Total	16,429	
	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 ... ...

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/360/CMO/HQ Dt. 18/8/09

HEALTH DEPARTMENT

(26) daily wager 811c, LM @ 151+DA per day.

(1+4) = 5 sheet.

MUSTER ROLL NO. 796. (From 18/8/09 To 31/8/09)

Circle No. IX Voucher No. .... Dated ....

In continuation of Muster Roll No. Fresh.

Accountant (HG).

CHIEF MEDICAL OFFICER

PART-NOMINAL-ROLL

S.No.	Name, Father's/Husband's Name & Address grouped according to classes	Designation	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.	Rate P.	Amount Rs.	Amount P.	Sign. or thumb impression of payee and dated initials of paying officer made at the time of payment
1	Sh. Arun S/o Sh. Mangi Ram. H. No. S-51 Balmiki Sadan Mandir Marg N. Delhi	D/wages S.K.																			P	P	P	P		P	P	P	P	P	P		P	11 days	151 +C.A		1689	00	Paid अरुण
2	Sh. Gautam S/o Sh. Rajender H. No. C-57 Palika Kunj New Delhi	do																			P	P	P	P		P	P	P	P	P	P		P	11 days	do		1689	00	Paid गौतम
3	Sh. Sanjay S/o Puran. H. No. S-45 Balmiki Sadan Mandir Marg N. Delhi	do																			P	P	P	P		P	P	P	P	P	P		P	11 days	do		1689	00	Paid
4	Sh. SUNIL S/o Mahesh H. No. G-12 Palika Dham New Delhi	do																			P	P	P	P		P	P	P	P	P	P		P	11 days	do		1689	00	Paid
5	Sh. Sanjay S/o Sh. Prem Chand H. No. A. 319 Minto Road Complex N. Delhi	do																			P	P	P	P		P	P	P	P	P	P		P	11 days	do		1689	00	Paid संजय
	Daily Total																				5	5	5	5		5	5	5	5	5	5		5	55 Days	G. Total		8445	00	
	Initials of person marking the daily attendance																																						
	Initials of Inspecting Officer																																						

~~Net Payable Rs.~~

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

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