HEALTH DEPARTMENT

Sheet-5

MUSTER ROLL NO. 798 (From 18/8/09 To 31/8/09)

Circle No. XI Voucher No. ..... Dated .....

In continuation of Muster Roll No. Fresh. 77/H 14/9/09

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
26	SH Shekhar S/o Sh Babu Lal C-17 Palika Dham Bangla Sahib Road N.D	Daily wages S/K	P P P P P S P P P P P P P P P A P P P A P P P A P P P	8½ days	151+CA	1321-00	
27	Smt Krishna w/o Sh Prakash 94/A yousuf Sarai N.D	"	P P P S P P P P P P P A P P P	7 days	"	1025-00	
28	SH Anand S/o Sh Chattar Singh G-384 Purani Seema Puri Shadara Delhi-95	"	P P P P P P P S P P P P P P P A P P P	9 days	"	1382-00	
29	SH Ravi S/o Sh Babu Lal C-17 Palika Dham Bangla Sahib Road N.D-	"	P S A A A A A A A	01 day	"	154-00	
30	SH. Rajpal S/o Sh Babu Lal H.No 1134 J.J. colony Wazirpur New Delhi	"	P A A A A A A A	01 day	"	154-00	
				270 Days		41456-00	
		Daily Total	2 16 21 23 27 28 27 27 23 27 24 1 5	170 day	G. Total	41,610-00	
		Initials of person marking the daily attendance					
		Initials of Inspecting Officer					

Not payable Rs. 41,456-00

Cutting Attested AAO(H)

Pay Rs. 41,456 (Rupees Forty one thousand Four hundred fifty six only)

Pay Rs 41,456-00 3/3

S.No 1 to 30 All Thumbs signature attested and fully paid

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.

CANCELLED 11/9/09 Released for Payment

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

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

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

Reckoner 08/9/09 Recd. on 7-9-09 Entry has been made on page 57 at Sr. No. 1530. Akumar

S.O.(H.G.) 8-9-09

HEALTH DEPARTMENT

Sheet-4.

MUSTER ROLL NO. 798 (From 18/8/09 To 31/8/09)

Circle No. XI Voucher No. ..... Dated .....

In continuation of Muster Roll No. Green.

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
21.	SH Lala Ram S/o Dhanna Ram T-14 Kalu Sheraya Village.		P P P P P S P P P P P P S P	198 days 9 days	151+CA	1382-00	
22.	Smt Sunita w/o Hem Raj 10/90 Tajpak Pari Delhi 91		P P P P P S P P P P P P S P	11 days	"	1689-00	
23.	SH Satpal S/o Rishi Pal 17/476 Block-17 Kalyanpuri Delhi-91		P P P P P S P P P (H) P P S P	9 days	"	1382-00	
24.	SH Mahesh S/o Mithoulal T-1 Katewariya Shara T-Hutz Hazrat Nizamuddin		P S P P P P P P S P	8 days	"	1228-00	
25.	Smt Sunita w/o Ashak Ko Q No-8 Tipe-1 Lajpat Nagar N Delhi		P P P P P S P P P P P P S P	11 days	"	1689-00	
				246 Days		Rs 37,770-00	
	Daily Total		2 16 10 21 23 5 24 24 24 21 24 24 5 23	247 day	G. Total	37,924-00	
	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-3

MUSTER ROLL NO. 798 (From 18/8/09 To 31/8/09)

Circle No. XI Voucher No. ..... Dated .....

In continuation of Muster Roll No. Roosh.

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
16.	Smt Pinki w/o Sh Prakash F-193 J J Camp Tigri Delhi		P P P P P P P P P P P S P P P P P P P P P P P S P	9 days	(151+RA)	1382-00 Paid	Pinky
17.	Sh Vijay s/o Sh Babulal F-117 J-J Camp Tigri Delhi		P P P P P P P P P P P S P P P P P P P P P P P S P P	11 days	"	1689-00 Paid	Vijay
18.	Sh Ajay Kumar s/o Sh Sureshchand 3/89 Bapa Dham Chankya Puri N. Delhi 21		P P P P P P P P P P P S P P P P P P P P P P P S P P	11 days	"	1689-00 Paid	Ajay
19.	Sh Naresh s/o Sh Gindhari Lal 10/83 Trilok Puri Delhi-91		P P P P P P P P P P P S P P P P P P P P P P P S P P	11 days	"	1689-00 Paid	नरेश
20.	Sh Narender Kr s/o Sh Ashok Kr 10/38 Trilok Puri Delhi-91		P P P P P P P P P P P S P P P P P P P P P P P S P P	11 days	"	1689-00 Paid	
	Daily Total		2 14 17 17 18 S 19 19 19 17 19 19 S 18	198 days	G. Total	30400-00 30554-00	
	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.

HEALTH DEPARTMENT

Sheet-II

MUSTER ROLL NO. 798 (From 18/8/09 To 31/8/09)

Circle No. XI 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.	SH Vikas S/o Sh Ramesh Kumar S-18 Prithvi Raj Lank Khan Market M.D-3		P P P P P S P P P P P S P	103 Days 12 days	151-68	1842 Paid	Vikas
12	Smt Mamta w/o Sh Ashok Kumar 3/3 Servent Qts South Avenue Lane Delhi-01		P P P P P S P P P P P S P	10 days	"	1535-00 Paid	Mamta
13.	SH Ravi S/o Sh Jaychand 10/86 Tilak Nagar Delhi-91		P P P P S P P P P A P P S P	9 days	"	1382-00 Paid	Ravi
14.	SH Ram Dev S/o Sh Fakirchand 186 New Seemapuri D-Block Delhi		P P P P S P P P P P P S P	11 days	"	1689-00 Paid	Ram Dev
15	Smt Asha w/o Sh Anil F-34 N.D.P. C House Camp Bank Nizamuddin Marg N.D-01		P A A A A A A A S A	Nil	"	Nil	
	Daily Total		2 10 12 12 13 5 14 14 14 12 14 14 5 14	145 Days	G. Total	Rs 22,362-00 22,416-00	
	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.

HEALTH DEPARTMENT

Sheet-I

MUSTER ROLL NO. 798 (From 18/8/09 To 31/8/09)

Circle No. XI 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.	Smt Preeti w/o Sh Mukesh Kumar 140 Maharani Enclave Uttam Nagar Delhi																				P P	P P	P P	P P	S	P P	P P	P P	P P	P P	P P	S	P P	11 days	151+CA	1689-00	
7.	Sh Rahul S/o Sh Om Parkash 4812 Block Shakur Pur J.J. Colony Delhi-34																				P P	P P	P P	P P	S	P P	P P	P P	P P	P P	P P	S	P P	10 days	"	1535-00	
8.	Sh Vinod S/o Sh Ramesh A-160 Jawala Puri Camp No 4 Delhi-86																							P P	S	P P	P P	P P	P P	P P	P P	S	P P	9 days 8 days	"	~~1282~~ Paid 1228-00	
9.	Smt Geeta w/o Sh Rakesh 18/445 Trilok Puri Delhi-91																				P P	P P	P P	P P	S	P P	P P	P P	P P	P P	P P	S	P P	12 days	"	Paid 1842-00	
10.	Sh Sanjay S/o Sh Om Parkash 1153 Gautam Puri Ph-I Badar Pur N.D.-44																				P P	P P	P P	P P	S	P P	P P	P P	P P	P P	P P	S	P P	11 days	"	Paid 1689-00	
																																		103 days		Rs 15814-00	
	Daily Total																				1	8	8	8	9	S	10	10	10	9	10	10	S	10		G. Total	~~15968-00~~	
	Initials of person marking the daily attendance																									S							S				
	Initials of Inspecting Officer																									S							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

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

Rs.	P.

O-O No:- D/360/HQ(EMO) dt 18/8/09.

HEALTH DEPARTMENT

(30) daily wager SHE, CIB @ 151+CA per day

(1+3) = 6 Sheet.

MUSTER ROLL NO. 798 (From 18/8/09 To 31/8/09)

Circle No. XI 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 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	Sh Ajaib Singh S/o Sh Ram Kishan B-13 Mahavir Enclave-1 New Delhi		P P P P P P S P P	07 days	151+CA	1675-00 Paid	
2.	Sh Ashok Kumar S/o Sh Balwan Singh G-3-1/38 Sai Enclave Block-G3 Part-1 Mohan Garden Delhi-110059		P P P P P P S P P	11 days	"	1689-00 Paid	
3.	Sh Vikash S/o Sh Dayal Ram A-862 Jawala Puri Delhi-87		P P P P P P S P P	11 days	"	1689-00 Paid	Vikas
4.	Smt Darshna w/o Sh Vishal 129/A Masjid Math N. Delhi Harijans		P P P P P P S P P	11 days	"	1689-00 Paid	Darshana
5.	Smt Sunita w/o Sh Rajender 5-Savitri Nagar Delhi		P P P P P P S P P	11 days	"	1689-00 Paid	Sunita
	Daily Total		4 4 4 4 S S S S S S S S	51 days	G. Total	7831-00	
	Initials of person marking the daily attendance		S S S S				
	Initials of Inspecting Officer		S 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

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

Rs.	P.