

HEALTH DEPARTMENT

MUSTER ROLL NO. 3431

(From 24-1-07 To 31-1-07)

20 Bailiyager S.K.L. 200
Comp. Sheet No. 3

Circle No. V Voucher No. Dated

In continuation of Muster Roll No. 3431 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																															Daily Total	Initials of person marking the daily attendance	Initials of Inspecting Officer	Rate	Amount	Sign, or thumb impression of payee and dated initials of paying officer made at the time of payment	
			To															Total	Rs.	P.	Rs.																			
			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
11	Sm. RENU W/o Ram Kumar Block No → Extra - 31 H.No → 98-99 To Lok Basi Delhi																																			7249		898.00	(57.7)	<i>[Signature]</i>
12	Sm. HARIKESH S/o SATYA-NARAYAN 10/1 Main Road Johar New Delhi-91																																			5 day		641.00	<i>[Signature]</i>	
13	Sm. RAKESH S/o SH. NAND KISNOH 11/1 Aggarwal Colony Rajdhani Park, Nandla, Noida																																			6 day		769.00	<i>[Signature]</i>	
14	Sm. RAHUL RAKESH S/o Sm. VED PRAKASH 4/80, Mandola, Chandni, Noida																																			7 day		898.00	<i>[Signature]</i>	
15	AMIT S/o SURESHCHAND 188. HSBY on Basai Noida																																			6 day		769.00	<i>[Signature]</i>	
									G. Total																											12826.00				

Pay Rs. (Rupees

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

Total amount paid (in words) Rupees Balance Paid

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.

HEALTH DEPARTMENT

MUSTER ROLL NO. 3431

(From 29-1-24

To 31-1-24

Circle No. V

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		Daily Total	Initials of person marking the daily attendance	Initials of Inspecting Officer	Rate	Amount	Sign. or thumb impression of payee and dated initials of paying officer made at the time of payment
			1	2						
①	Sr. NAND LAL s/o Sr. MANOJAT RAM E-73/14 383 21st M.I. Shivajinagar				6 days			Rs. 125.80 + CA	789.00	(Signature) Sr. Nand Lal
②	Smt BEENA w/o Sr. RAJIV CHAND Mohan - 30 At P.T. Chowk S.D. Dargah				7 days			Rs. 898.00	698.00	(Signature) Sr. Beenaa
③	Sr. VIKASH s/o Sr. RAJEEV Harjyambhat M.Ng A. Dehu				7 days			Rs. 898.00	698.00	(Signature) Sr. Vikash
④	Sr. MAHESH s/o Sr. SYAMLAL Browly. Bali Kgs Station Harward Mathurba A. Dehu				7 days			Rs. 898.00	698.00	(Signature) Sr. Mahesh
⑤	Sr. MAHENDER s/o Sr. CHAGGURAM 518 No 2/112				7 days			Rs. 898.00	698.00	(Signature) Sr. Mahender
					30 days			G. Total	4361.00	

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

Rs.	P.
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(Signature) Sr. K. J. B. J.
Only Four sheets (43-4)

CHIEF MEDICAL OFFICER