

Appraisal No. 4838/15/Classification, 14-7-8-06

HEALTH DEPARTMENT

MUSTER ROLL NO. 3454

(From 1-2-07 To 19-2-07)

Circle No. XIII Voucher No. 53/M. Dated 6/2/07

In continuation of Muster Roll No. 3407

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.....																															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	Sub Angarai wife Matikam																																				
2	Sub Sita wife Rajendran																																				
3	Sub F.R.R. R.R. Rame																																				
4	Sub BIRLA MAD																																				
5	Sub SPAs 3253																																				
			Daily Total																																		

Pay Rs. 3253 (Rupees) Three thousand two hundred and fifty three only

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

Accountant (HG) [Signature]

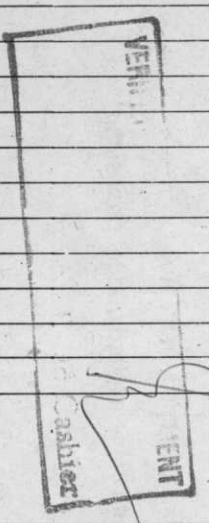
CHIEF MEDICAL OFFICER [Signature]

Sign. or thumb impression of payee and dated initials of paying officer made at the time of payment

2082 on [Signature]

14/11/07 [Signature]

Recd 15/07/07
1.55 PM
2/2/07
N. S. 56 lab 10-12
95



Rs. P. [Signature]

16/11/07 [Signature]

② Paid/only are sheet

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.

M.O.H. [Signature]

Grand Total of this Muster Roll ...

Rs. P. [Signature]