O.O.No. D/981/C.M.O.(HQ), dt- 8.1.07

# HEALTH DEPARTMENT

## MUSTER ROLL NO. 3460 (From 1-2-07 To 28-2-07)

(26) Dailywages Sweepers/Lab Const. Sheet No-5

Circle No. IV Voucher No. 46/H Dated 6/3/07

In continuation of Muster Roll No. 3430

PART-NOMINAL-ROLL

Accountant (HG),

CHIEF MEDICAL OFFICER

| S.No. | Name, Father's/Husband's Name & Address grouped acccrding 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 |
|---|---|---|---|---|---|---|---|---|---|
| 23 | Ashish S/o Jaxmon. 8/3 DDA. Palat Phase Guj | | L=Leave Duty | 125-8P +66-0P | 23 | | 2993-00 | | |
| 24 | Monoj Kanwar S/o Ramshwar B-12 Palika Dhom. N.D | | L=Leave Duty | 11 | 22 | | 2863-00 | | |
| 25 | Bimla W/o Sundar Pal B-2 Madan Gicchi N.D. | | | 11 | 23 | | 2993- | | |
| 26 | Jaxami W/o Ramash. G135 Harijan Basti N.D | | | 11 | 24 | | 3124-00 | | |
| | | | Daily Total | | 514 | | 66897 | | |
| | | | Initials of person marking the daily attendance | | G. Total | | 66907-00 | | |
| | | | Initials of Inspecting Officer | | | | 67027-00 | | |

Received on 1/3/07 at 4-25 PM

Entry Ike page no 91 Sonnel No 41/Estt/1/3/07

Pay Rs..... (Rupees Sixty six thousand Eight hundred Ninety Seven only)

S6(Hq) 1/3/07 4/35 PM Pay Rs 66897 — Rs Sixty six thousand Eight hundred Ninety Seven only

SNo 1 To 26 Sign/RT-I/LT-I/Allowed

Accountant (HG) 6-3-07

(M. C. MISHRA) AAO (Public Health) N.D.M.C. Palika Kendra

M.O.H. Sr. A.O.

CANCELLED (6603-)

S. P. TANEJA AO (Public Health) N.D.M.C. Palika Kendra New Delhi

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 ... ... ... ... ...

Rs. P.

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

Paid in full

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

Dues 1/3/07 4-30 PM

O.O. No. → 981/C.M.O. (HG), dt- 8.1.07

# HEALTH DEPARTMENT

## MUSTER ROLL NO. 3460 (From 1-2-07 To 28.2.07)

(26) Dailywager DKa/L.BS
Cont. sheet No. 4,

Circle No. IV Voucher No. Dated.

In continuation of Muster Roll No. 3430

PART-NOMINAL-ROLL

Accountant (HG),

CHIEF MEDICAL OFFICER

| S.No. | Name, Father's/Husband's Name & Address grouped acccrding 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 |
|---|---|---|---|---|---|---|---|
| 19 | Laxmi W/o Ravan Babu 18/339 Kalyan. Puri N.D | | P P P S P P P P P P S P P P P S P P P P P S P P P — | 20 | 127.40 466-00 | 2603-00 | |
| 20 | Amit S/o Om Parkash. B-806 Indra Puri N.D | | P P P S P P P P P S P P P P P S P P P P P S P P P — | 22 | 11 | 2863-00 | |
| 21 Veer | ~~Kuldeep~~ Singh S/o Jagga Ram 21/48 Tudak. Puri N.D | | L L S L L S L L S S L L L S S L L L L S L L L — | 15 | 11 | 1952-00 | |
| 22 | ~~Kuldeep~~ Vekash S/o Dhan Singh 101 Harijan. Basti N.D | | P P P S P P P P P S P P P P P S P P P P P S P P P — | 24 | 11 | 3124-00 | Ukas |
| | | | | 422 | | 54924 | |
| | Daily Total | | S S S S | 413 | G. Total | 55054-00 | |
| | Initials of person marking the daily attendance | | | | | | |
| | Initials of Inspecting Officer | | S S 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/981/C.M.O.(HQ), dt. 8.1.07

# HEALTH DEPARTMENT

## MUSTER ROLL NO. 3460 (From 1.2.07 To 28.2.07)

(2nd Sanjay nagar S.K.P/L.B.S Const. sheet No. 3.

Circle No. IV Voucher No. Dated.

In continuation of Muster Roll No. 3430

PART-NOMINAL-ROLL

Accountant (HG), 33449 CHIEF MEDICAL OFFICER

| S.No. | Name, Father's/Husband's Name & Address grouped acccrding 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 |
|---|---|---|---|---|---|---|---|
| 14 | Sanjay S/o Ram Kishan. A-89 Nanglai N.D. | | L=Leave duty | 8 | 127.40 +66-00 | 1041-00 | |
| 15 | Raj Kumar S/o Puran. F2. Pahlwan Dhani. N.D | | | 20 | 11 | 2603-00 | |
| 16 | Anil S/o Gulab Singh A-89 Nanglai N.D. | | L=Leave duty | 14 13 | 11 | 1822-00 1692 | |
| 17 | Vinod S/o Sunder Pal 35/35 Juggi Camp Sutlon Pari N.D. | | L=Leave duty | 19 | 11 | 2473-00 | vinod |
| 18 | Deepmala W/o Ashok 202 Harijan Basti N.D. | | | 24 | 11 | 3124-00 | Deepmala |
| | | | | 341 | | 44382 | |
| | Daily Total | | | 332 | G. Total | 44512-00 | |
| | 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. |
|---|---|
| | |

O.O. No. D/981/C.M.O.(HQ), dt. 8.1.07

# HEALTH DEPARTMENT

## MUSTER ROLL NO. 3460 (From 1-2-07 To 28-2-07)

(26) Dailywager S.Ks/L.Bl
Cont. sheet No. 2.

Circle No. IV Voucher No. Dated

In continuation of Muster Roll No. 3436

PART-NOMINAL-ROLL

Accountant (HG)

CHIEF MEDICAL OFFICER

| S.No. | Name, Father's/Husband's Name & Address grouped acccrding 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 |
|---|---|---|---|---|---|---|---|
| 7. | Sumit S/o Om Parkash. 109 HP.O Kutab Gaon N.D. | R=Tuesday | L=Leave/Duty | 9 | 127.40 +66-00 | 1171-00 | |
| 8 | Vijay S/o Daya Ram. 306 Jyanti Kellag N.D. | R=Monday | L=Leave/Duty | 19 | 11 | 2473-00 | Vijay Kumar |
| 9 | Yogesh S/o Jaggee. S-41 Harijan. Boshi | | L=Leave/Duty | 17 | 11 | 2213-00 | |
| 10 | Rajesh S/o Sukh Lal F-268 Madan Giri N.D. | | | 24 | 11 | 3124-00 | |
| 11 | Shyam Sunder S/o Babu Lal C-33/93 Kali Bari Marg | | | 23 | 11 | 2993-00 | |
| 12 | Sunder S/o Lal Singh. G-9 Pali Ka Dham. N.D. | R=Sunday | L=Leave/Duty | 19 | 11 | 2473-00 | |
| 13 | Indeerjet S/o Pan Kash. G-9 Palika Dham N.D | R=Monday | L=Leave/Duty | 16 | 11 | 2092-00 | |
| | Daily Total | | | 257 | G. Total | 33440-00 | |
| | 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. |
|---|---|
| | |

O.O. No. D/981/C.M.O.(HQ), dt. 8.1.07

# HEALTH DEPARTMENT

## MUSTER ROLL NO. 3460 (From 1-2-07 To 28.2.07)

(20 Dailywager Sks/L.Bs Only five sheet (1+4=5)

Circle No. IV Voucher No. Dated

In continuation of Muster Roll No. 3430

PART-NOMINAL-ROLL

Accountant (HG), CHIEF MEDICAL OFFICER

| S.No. | Name, Father's/Husband's Name & Address grouped acccrding 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 | Smt. Shakuntla/o Jay Ray Shaela C-203 Dakshin Puri Delhi | | 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 S — | 24 | 127-14 +66-00 | 3124-00 | |
| 2 | Smt. Rajja C/o Konwal Singh 137 Lady Hardinge Satff qtr. | | 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 S — | 24 | 11 | 3124-00 | |
| 3 | Gulshan S/o Banu 1268 Mangal Puri N.D | | 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 S — L=Leave Duty | 22 | 11 | 2863-00 | |
| 4 | Jitender S/o Lakhmi Chand 503/Pondara Rd Shadhara | | 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 S — L=Leave Duty | 17 | 11 | 2213-00 | |
| 5 | Kailashi W/o Madan Lal 17/126 Tirlok. puri N.D | | 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 S — | 22 | 11 | 2863-00 | |
| 6 | Rukmani W/o Badh Ram 2556/EE Jhangeer. Puri N.D. | | 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 S — | 21 | 11 | 2733-00 | |
| | Daily Total | | S S S S | 130 | G. Total | 16920-00 | |
| | Initials of person marking the daily attendance | | | | | | |
| | Initials of Inspecting Officer | | S S 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. |
|---|---|
| | |