O.O.No. D/981/CM.O.(HQ), dt. 8-1-07

HEALTH DEPARTMENT

MUSTER ROLL NO. 3468 (From 1-2-07 To 28-2-07)

(21) Ledger Sl.No/L.Bo Count-sheet No.5-

Circle No. XII Voucher No. 6/H Dated 1/3/07

In continuation of Muster Roll No. 3438

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.	Sign. or thumb impression of payee and dated initials of paying officer made at the time of payment
19	Sh. Dinesh S/o Vijender Singh	Sfr	23 days	127.46 f/c/p	2993-00 NMD Rolls	Paid Dinesh Singed Attested & AS I/C 12
20	Sh. Rajesh S/o Ramesh A-25 D.D.A. Dubble Story Gadhi East of Kailash N. Delhi. 65	Singed Rajesh & Rajesh	24	do	3124-00 NMD Rolls	Paid
21	Sh. Sunil S/o Prem Singh A-205 Inder Puri New Delhi-	Sfr सुनील कुमार Singed AA & AS I/C 12	24	do	3124-00 NMD Rolls	

Pay to Staff Rs 65122
B/F Rs Nil
GAR Rs 65122

Received on 1/3/07 10.30 AM.

Entry in page No 91 Sr.No 38 dt 1/3/07

Daily Total 3 3 3 3 3 3 3 3 3 3 3 3 3 3 3 3 3 3 3 3 3 3 3 3 3 3 3 3 3 — G. Total 65222/-

Initials of person marking the daily attendance.

Initials of Inspecting Officer.

1/3/07 10.40 AM 65122

Pay Rs. 65122 (Rupees Sixty five thousand One hundred Twenty two only)

1/3/07 10.35

Accountant (HG)

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 1.3.07

M.O.H. Sr. A.O (H)

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

O.O.No-D/981/C.M.O.(HQ), dt- 8-1-07

HEALTH DEPARTMENT

MUSTER ROLL NO. 3468 (From 1-2-07 To 28-1-07)

(21) Kailyanger S.Ks/L.B3
Cont. Sheet No. 4.

Circle No. XII Voucher No. Dated.

In continuation of Muster Roll No. 3438

Accountant (HG), CHIEF MEDICAL OFFICER

PART-NOMINAL-ROLL

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
15	Pramjit Ram S/o Sh. Bhikari Mandir Marg New Delhi	L/B	24 Days		3085-00 Delh. Rules	Signed Attested रामजीत राम AS.2
16	Ved Pal S/o Sh. Om Parkash H. No 121 Village Post Office Mojza Dabas.	do	24 Days		3085-00 Delh. Rules	Paid Ved Pal Signed Attested
17	Mahipal S/o Sh. Ram Kuvesh B-137 D.D.A Flats Garhi	S/K	24 Days		3085-00 Delh. Rules	Signed Attested AS.2
18	Narender S/o Sh. Sri Parkash E/17/28 Shahabad Dairy Delhi	L/B	24 Days		3085-00 Delh. Rules	Paid Signed Attested
	X Dinesh S/o Vijender 71/2 H. Basti Vasant kunj Delhi		Flat Name S.No 198 Adjusted 20 P.TO S AS.2C-12			
	X Rajesh S/o Sh. Ramesh A-25 East of Kailash.		AS.2C-12			
			432			
	Daily Total		482	G. Total	55987	
	Initials of person marking the daily attendance				55881	
	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 ... ... Rs. P.

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

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

Del Signed Attested bill Fully Paid

O.O. No. 3/981/C.M.O.(HQ), dt-8-1-07

HEALTH DEPARTMENT

MUSTER ROLL NO. 3468 (From 1-2-07 To 28-2-07)

(21) Sailyagar S.Rs/L.D) Cont. sheet No. 7.

Circle No. XII Voucher No. Dated.

In continuation of Muster Roll No. 3438

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
11	Rakesh s/o Sh. Ved Parkash D-Ashram Puri N. Delhi	L/Bold	24 Days		3085-00 Old Rates	Singed Attested
12	Rajeev s/o Sh. Ramesh A-25 Gadhi East of Kailash	S/K	24 Days		3085-00 Old Rates	RAJIV Singed Attested
13	Laxman s/o Sh. Suraj Singh 10/91 Tirlok Puri N.D. 91	L/B	24 Days		3085-00 Old Rates	Laxman Singed Attested
14	Jayoti w/o Sh. Ravi & Balmiki Basti Mandir Marg	S/K	24 Days		3085-00 Old Rates	JYOTI Singed Attested
15	Rajesh s/o ~~Ram Chander~~ ~~Tilley Singh~~ Tilley Singh C-II 424 Sultan Puri	Sk	24 Days		3085-00 Old Rates	
	Daily Total		336 ~~386~~ Total		4364/- 4354/-	21/5/21
	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. 3468 (From 1-2-07 To 28-2-07)

(21) Daily wager 8-12s/L.B.
Cont. sheet No. 2.

Circle No. XII Voucher No. Dated.

In continuation of Muster Roll No. 3438

Accountant (HG),

CHIEF MEDICAL OFFICER

PART-NOMINAL-ROLL

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
6	Rameshwar S/o Sh. Chowan Shuggi No 85 A.B.D. Netaji Nagr.	Duty on Lorry do	P P P S P P P P P P S P P P P P P S P P P P P S P P P	24d	127.40 +C/A	3124-00 Nine Rupees Thirty Four Only	23/2/2012 Paid
7	Sanjiee S/o Sh. Ram-kishan. B. 255. Sultanpuri	Duty on Lorry do	P P P S P P P P P P S P P P P P P S P P P P P S P P P	24d	do	3124-00 Nine Rupees Thirty Four Only	संजीव Paid
8	Parvinder S/o Sh. Balkishan Vill. Sabote Dehradoon	Duty on Lorry do	P P P S P P P P P P S P P P P P P S P P P P P S P P P	24d	do	3124-00 Nine Rupees Thirty Four Only	Parvinder Paid
8	Sunil S/o Sh. Prem Singh		H		do		Paid
9	Kamal S/o Sh. Deep Chand 185 Narayan Vill. N. D.	Duty on Lorry do	P P P S P P P P P P S P P P P P P S P P P P P S P P P	24d	do	3124-00 Nine Rupees Thirty Four Only	Paid
	Daily Total			216	G. Total	28116	
	Initials of person marking the daily attendance		S S S S S			28116	
	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/901/C.M.O.(HQ), dt. [illegible]

HEALTH DEPARTMENT

MUSTER ROLL NO. 3468 (From 1-2-07 To 28-2-07)

(21) Daily wager S.Ks/L.Bs Only Five sheets

Circle No. XII Voucher No. Dated.

In continuation of Muster Roll No. 3438

Accountant (HG), CHIEF MEDICAL OFFICER

PART-NOMINAL-ROLL

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 Laxmi W/o Sh. Ashok H.No. 2/45 Dapuchcam.	S/K	P P P O P P P P P P P O P P P P P O P P P P P P O P P P P P O P P P P P P P