O.O. No. D/981/C.M.O.(HQ), dt. 8.1-07

HEALTH DEPARTMENT

MUSTER ROLL NO. 3515 (From 1-4-07 To ~~30-4-07~~ 22-4-07)

(11) Daily wager S.K./L.S.S. Cont. sheet No. 2.

Circle No. I Voucher No. 22/4 Dated 7/5/07

In continuation of Muster Roll No. 3472

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 Rs. P.	Amount Rs. P.	Sign. or thumb impression of payee and dated initials of paying officer made at the time of payment
8	Sh. Narender Kr. S/o Beghwana ADD	Lorry Beldar	S P P P P P P S P P P P P P S P P P P P P S	17 18		2211 2341	Narender
9	Vinod S/o ADD	Lorry Beldar	S P P P P P P S P P P P P P S P P P P P P S	17 18		2211 2341	Vinod
10	Meera W/o Vinod ADD	TMR S.K.	S P P P P P P S P P P P P P S P P P P P P S	17 18		2211 2341	मीरा
11	Leena W/o Manoj ADD	TMR S.K.	S P P P P P P S P P P P P P S P P P P P P S	17 18		2211 2341	लीना
	Pay to Staff Rs 21979 B/F Rs Nil GA Rs 21979			169 160		21979	
	Daily Total				G. Total	20,809	
	Initials of person marking the daily attendance						
	Initials of Inspecting Officer						

Received on 8/5/07 at 12.05 P.M.

Entry 16 page No 97 serial No 100 dt 8/5/07

SO(HG) 3/5/07 12/35 PM

Pay Rs. 21979 (Rupees) Rs Twenty one thousand Nine hundred Seventy Nine only

Accountant (HG) (M.C. MEHRA) AAO (Public Health) N.D.M.C., Palika Kendra

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

VERIFIED FOR ... Head Cashier

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.

Fwd Paid S No-1 to 11 R.T.I and Sign attested

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

HEALTH DEPARTMENT

MUSTER ROLL NO. 3515 (From 1-4-07 To ~~22-4-07~~ 22.4.07)

(11) Daily wager S.K.S/L.B.S
Only Two sheet (1+1=2)

Circle No. I Voucher No. ..... Dated .....

In continuation of Muster Roll No. 3472

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 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. Bimla W/o Rajk- ADD-			17 18		2211-00 2341	
2-	Smt. Kanta W/o Jagdish- ADD-			15 16		2081 1951-00	
3-	Sh. Vikram S/o Laxmangirt- ADD-	Lorry Belaa-		17 18		2341 2211-00	
4-	Smt. Asha W/o Subodh- ADD-			09		1170-00	
5-	Sh. Surender S/o ADD-	Lorry Belaa-		18 17		2341 2211-00	
6-	Smt. Ranjeeta W/o Manoj- ADD-			18 17		2341 2211-00	
			Daily Total	97 92	G. Total	12615 11,965-00	
			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.