

HEALTH DEPARTMENT

MUSTER ROLL NO. 3661

Circle No. 11 Voucher No. 3668 Dated 11/9/07
 In continuation of Muster Roll No. 3668 from 1-6-07 To 22-6-07

PART-NOMINAL-ROLL

| 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 | | | | | | | | | | | |
|-------|--|-------------|------------|----|------|----|-------------|---|--------------------------------|------|--------|---|----|----|----|----|----|----|----|----|----|----|----|
| | | | From | To | From | To | | | | | | | | | | | | | | | | | |
| 16 | Ajay S. B. Kishan Maidan Bhatti Meharoli Delli. | Daily wages | 11 | 12 | 13 | 14 | 15 | 16 | 17 | 18 | 19 | 20 | 21 | 22 | 23 | 24 | 25 | 26 | 27 | 28 | 29 | 30 | 31 |
| | | | 11 | 12 | 13 | 14 | 15 | 16 | 17 | 18 | 19 | 20 | 21 | 22 | 23 | 24 | 25 | 26 | 27 | 28 | 29 | 30 | 31 |
| | | | 11 | 12 | 13 | 14 | 15 | 16 | 17 | 18 | 19 | 20 | 21 | 22 | 23 | 24 | 25 | 26 | 27 | 28 | 29 | 30 | 31 |
| | | | 11 | 12 | 13 | 14 | 15 | 16 | 17 | 18 | 19 | 20 | 21 | 22 | 23 | 24 | 25 | 26 | 27 | 28 | 29 | 30 | 31 |
| | | | 11 | 12 | 13 | 14 | 15 | 16 | 17 | 18 | 19 | 20 | 21 | 22 | 23 | 24 | 25 | 26 | 27 | 28 | 29 | 30 | 31 |
| | | | 11 | 12 | 13 | 14 | 15 | 16 | 17 | 18 | 19 | 20 | 21 | 22 | 23 | 24 | 25 | 26 | 27 | 28 | 29 | 30 | 31 |
| | | | 11 | 12 | 13 | 14 | 15 | 16 | 17 | 18 | 19 | 20 | 21 | 22 | 23 | 24 | 25 | 26 | 27 | 28 | 29 | 30 | 31 |
| | | | 11 | 12 | 13 | 14 | 15 | 16 | 17 | 18 | 19 | 20 | 21 | 22 | 23 | 24 | 25 | 26 | 27 | 28 | 29 | 30 | 31 |
| | | | 11 | 12 | 13 | 14 | 15 | 16 | 17 | 18 | 19 | 20 | 21 | 22 | 23 | 24 | 25 | 26 | 27 | 28 | 29 | 30 | 31 |
| | | | 11 | 12 | 13 | 14 | 15 | 16 | 17 | 18 | 19 | 20 | 21 | 22 | 23 | 24 | 25 | 26 | 27 | 28 | 29 | 30 | 31 |
| | | | 11 | 12 | 13 | 14 | 15 | 16 | 17 | 18 | 19 | 20 | 21 | 22 | 23 | 24 | 25 | 26 | 27 | 28 | 29 | 30 | 31 |
| | | | 11 | 12 | 13 | 14 | 15 | 16 | 17 | 18 | 19 | 20 | 21 | 22 | 23 | 24 | 25 | 26 | 27 | 28 | 29 | 30 | 31 |
| | | | 11 | 12 | 13 | 14 | 15 | 16 | 17 | 18 | 19 | 20 | 21 | 22 | 23 | 24 | 25 | 26 | 27 | 28 | 29 | 30 | 31 |
| | | | Total | | | | 13 | | | 13 | 2469 | Paid | | | | | | | | | | | |
| | | | Total | | | | 44 | | | 44 | 30905 | Thirtieth thousand - four hundred five only | | | | | | | | | | | |

VERIFIED FOR CASH/CHEQUE PAYMENT
 Head Cashier
 Initials of Inspecting Officer

Pay Rs. 30905 Rupees
 Accountant (HG)
 N.D.M.C. Palika Kendra
 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.

Accountant (HG)
 N.D.M.C. Palika Kendra
 Released the Payment

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

Rs. P.
 Total amt paid (in words) Rupees
 Balance Paid



Sanitation Officer

Approval No. 1701/20/Chairperson, dt-18.4.07

HEALTH DEPARTMENT

MUSTER ROLL NO. 3661

(From 1-6-07 To 22-6-07)

Circle No. II Voucher No. 3608 Dated

In continuation of Muster Roll No. 3608

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 | | | | |
| 1 | Kailash 1/0 Ram Doss A-24, M.V.I.D. Hospital Kingstreecamp, Delhi. | Daily wages | P | P | 16 days + C.A | Rs. 2079 | Paid | Sign. Attested R. T. 14/7/07 |
| 2 | Sumita 1/0 Suchdev 1, Balnikhi Sadan, Mandir Mangalpur | do | P | P | 19 days | Rs. 2469 | Paid | Sign. Attested R. T. 14/7/07 |
| 3 | Manisha 1/0 Atjay Balnikhi Sadan, Mandir Mangalpur | do | P | P | 19 days | Rs. 2469 | Paid | Sign. Attested R. T. 14/7/07 |
| 4 | Navleen 1/0 Hare Lal Patel Nagar, Near Panjth Nagar, Delhi | do | P | P | 12 days | Rs. 1559 | Paid | Sign. Attested R. T. 14/7/07 |
| 5 | Rakesh 1/0 Deen Dayal Kingstreecamp, Delhi | do | P | P | 09 days | Rs. 1169 | Paid | Sign. Attested R. T. 14/7/07 |
| 6 | Parveen 1/0 Uday Singh 186, Balnikhi Sadan, Mangalpur, Delhi | do | P | P | 19 days | Rs. 2469 | Paid | Sign. Attested R. T. 14/7/07 |
| 7 | Aseemkr. | do | P | P | | Nil | | Sign. Attested R. T. 14/7/07 |
| 8 | Devender kr. | do | P | P | | Nil | | Sign. Attested R. T. 14/7/07 |
| 9 | Rem 1/0 Myyama Ratin Staff, Delhi. | do | P | P | 18 days | Rs. 2339 | Paid | Sign. Attested R. T. 14/7/07 |
| | | | Daily Total | | 112 days | Rs. 14553 | Total | |

Pay Rs. (Rupees)

Accountant (HG)

M.O.H.

Sr. A.O

Grand Total of this Muster Roll

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.

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

Total amount paid (in words) Rupees

Balance Paid

| | |
|-----|----|
| Rs. | P. |
|-----|----|

17 Railwager Skol L.Rs
Only three sheets (1+2+3)