

Approval No. 2018/18/Chairperson, dt. 24.2.07
HEALTH DEPARTMENT
MUSTER ROLL NO. 3685 (From 1.8.07 To 22.8.07)
 Circle No. XIV Voucher No. 2600 Dated 23/9/07
 In continuation of Muster Roll No. 2600
PART-NOMINAL-ROLL
 Accountant (HG) [Signature] 4125
CHIEF MEDICAL OFFICER
 Sign. or Thumb impression of employee and dated initials of paying officer made at the time of payment
 23 Dillywager S.K.S/L.S.S
 Const. Sheet No. 5

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 employee and dated initials of paying officer made at the time of payment
			1	2					
22	Ram Gopal Shastri Prateb Singh 21-10, New Lucknow	S.K.S	P	P		14	121.14	22969	[Signature]
			P	P		14 days			
23	Lalit Verma Shastri. Mukesh Noida	-ds-	P	P		19	11.00	2469	[Signature]
			P	P		19 days			

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 employee and dated initials of paying officer made at the time of payment
			1	2					
22	Pooja Saha B.P.L. Rd.	S.K.S	P	P		35	127.14	44599	[Signature]
			P	P		35 days			

Pay Rs. 45999 (Rupees)	Initials of person marking the daily attendance	Initials of Inspecting Officer	Daily Total	G. Total	Rs.	P.
45999			3581	45999		

Accountant (HG) G. MISERAKI
 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.
 MOH. [Signature]
 ST. A.O. [Signature]
 Released for Payment

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
...

Approval No. 1001/85 | Chairperson, dt 24.2.07

HEALTH DEPARTMENT

MUSTER ROLL NO. 3675

(From 1-6-07

To 22-6-07

(23) Bailymagar S.K. | L.S.
Count sheet No. 4.

Circle No. XIV Voucher No. 3675 Dated 24.2.07
In continuation of Muster Roll No. 3674

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	Pay Rs.
			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				
17	VIKAS S/O SURESH PAJ 22/Pr. Kaveri N. De		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	P	P	P	P	P	18
																																					day.
																																					4th
																																					Rs. 2339
18	Amit Kumar S/O St. Rajpal 21/2. Madanpuri D.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	P	P	P	P	18	
																																					days.
																																					"
																																					Rs. 2359
19	Sandeep S/O St. Jaikishan 22/21.11. Agri. D.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	P	P	P	14		
																																					days.
																																					"
																																					Rs. 1819
20	Sagar S/O St. Kartar Singh 22/Sengliamed D.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	P	P	P	12		
																																					days.
																																					"
																																					Rs. 1559
21	Joginder S/O St. Ratan Singh 22/Pr. Kaveri N. De		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	P	P	P	19		
																																					day
																																					"
																																					Rs. 2469
																																					1
																																					318
																																					G. Total
																																					41321
																																					46281

Accountant (HG)

CHIEF MEDICAL OFFICER

Sign or thumb-impresion of payee and dated initials of paying officer made at the time of payment

Pay Rs. (Rupees)

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

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.

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.

HEALTH DEPARTMENT

MUSTER ROLL NO. 3673

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

(23) Dailymaster S.K. L.S. S. Comd. Quat No. 3,

Circle No. XIV Voucher No. 388
 In continuation of Muster Roll No. 3818

Accountant (HG),

CHIEF MEDICAL OFFICER

PART-NOMINAL-ROLL

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					
12	Rohit S/O B. I. Lamchand 1500 P. R. V. 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	P	P	P	P	P	P	
13	Rishi S/O B. Soni P. R. Leave P. D. A. L.		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	P	P	P	P	P	P	
14	Dinesh S/O B. Motilal Hansaram Bhatimondhi marg P. 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	P	P	P	P	P	P	
15	Rajesh S/O B. Kishan Lal B. B. P. B. S. Marg P. 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	P	P	P	P	P	P	
16	Ahil S/O B. Surat Singh K. A. P. R. 1000 P. D. A.		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	P	P	P	P	P	P	
			Daily Total																																			
			Initials of person marking the daily attendance																																			
			Initials of Inspecting Officer																																			

Pay Rs. (Rupees)

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

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

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.

Rs.	P.

HEALTH DEPARTMENT

Approval No. 411/81 Chairperson, dt. 24.2.07
MUSTER ROLL NO. 3693 (From 1-6-07 To 22-6-07)
3 Bailynages SK/L/S3
Only Five sheets (1+4=5)

Circle No. XIV Voucher No. 3699 Dated

In continuation of Muster Roll No. 3699

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	Sr. Rakesh of Krishna Ram Muniraisen Road	Sr. P.S. / Sr. P.A.	A																															21	Nil	2339	
2	Sr. Anilkumar of Hari Chaman 20 P.R. Lane N. Se	-	P																															18	12716	2339	
3	Sr. Komal Krishna of X Land Ching Nelli 62.	-	P																															19	11	2469	
4	Sr. Ravinder of Raj Kumar 102 Arimachan 700	-	P																															17	11	2289	
5	Sr. Kishan of Sr. Vijay Sani 102 Arimachan 700	-	P																															13	11	1689	
6	M. D. Jayanti of Chandra 61/ Basal N. Se	-	P																															18	11	2339	
	Daily Total		P																															85	G. Total	11045	

Pay Rs. 11045 (Rupees)

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