O. No. D/542/PA/M.O.H/07, dt. 6.7.07

HEALTH DEPARTMENT

MUSTER ROLL NO. 3710 (From 15-6-07 To 30-6-07)

(23) Daily wager seasonal A.M.G. Cont. Sheet No. 4.

Circle No. 5&6 Voucher No. 41/H Dated

In continuation of Muster Roll No. Fresh 1078

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 Rs. P.	Amount Rs. P.	Sign. or thumb impression of payee and dated initials of paying officer made at the time of payment
19	गजेन्द्र पाल S/o श्री नौबत सिंह B 1159 गली नं. 4 संगम विहार	A.M.G. Daily wager	P P S P P P P P S P P P P P P	14		1819=00	Paid गजेन्द्र पाल 13/8/07 Sd/-
20	दिलिप कुमार S/o श्री राम सिंह झुग्गी नं. 50 89 अर्जुन दास कैम्प तीन मूर्ति फ्लिस लाईन नं. दि. 11	-do-	P P S P P P P P S P P P P P P	14		1819=00	Paid Dalip Sd/-
21	संजय S/o श्री जयपाल 19/275 बापू धाम नं. दि. 23	-do-	P P S P P P P P S P P P P P P	14		1819=00	Paid संजय 13/8/07 Sd/-
22	सुमिल S/o श्री काली चरण A 56 जवाहर पार्क खान पुर देवली रोड नं. दि. 62	-do-	P P S P P P P P S P P P P P P	14		1819=00	Paid सुमिल कुमार Sd/-
23	मनोज कुमार S/o श्री चन्द्रपाल J 138 दक्षिण पुरी नं. दि. 62	-do-	P P S P P P P P S P P P P P P	14		1819=00	Paid मनोज 13-8-07 Sd/-
	Pay to Staff Rs 41837 B/F Rs NIL					41837	
	SA Rs 41837	Daily Total	5 5 5 5 5 5 5 5 5 5 5 5 5 5	322	G. Total	43656=00	Forty three thousand six hundred fifty six only
		Initials of person marking the daily attendance					
		Initials of Inspecting Officer					

Pay Rs. 41837 (Rupees Rs Forty one thousand Eight hundred thirty seven only)

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

CANCELLED 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

Rs. NO - P. 1 to 23 No's PAID in full

16/8/07

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 CASH CHEQUE PAYMENT

Enter page No 5 S.No. - 96

80 (HG) 31/7/07

O.O.No. D/542/PA/M.O.H./07, dt - 6.7.07

HEALTH DEPARTMENT

MUSTER ROLL NO. 3710 (From 15-6-07 To 30-6-07)

(23) Dailywager seasonal A.M.G. Cont. Sheet No. 3.

Circle No. 5 & 6 Voucher No. ..... Dated .....

In continuation of Muster Roll No. fresh

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
13	देव कुमार S/o श्री प्रहलाद G-19 पृथ्वीराज लेन न०दि०03	A.M.G. Daily wages	P P S P P P P P P S P P P P P P	14		1819=00	Paid 13/8/07
14	विशाल सिंह S/o श्री आजाद सिंह H-No- 57 हाउसिंग काम्पलेक्स मन्दिर मार्ग	-do-	P P S P P P P P P S P P P P P P	14		1819=00	Paid
15	राकेश कुमार S/o श्री राम नाथ K-15-16 अमरकालोनी नोंगलोई	-do-	P P S P P P P P P S P P P P P P	14		1819=00	Paid राकेश कुमार
16	हर्ष वर्धन S/o श्री मदन लाल H-No 186 हाउसिंग काम्पलेक्स मन्दिर मार्ग	-do-	P P S P P P P P P S P P P P P P	14		1819=00	Paid Harshwardhan 13/8/07
17	अर्जुन सिंह S/o श्री राजेन्द्र सिंह RZ H II/143 महावीर इन्कलेव बंगाली कालोनी पालम न०दि०पा	-do-	P P S P P P P P P S P P P P P P	14		1819=00	Paid Arjunsingh
18	हंस राज S/o श्री बलबीर गाँव D 356, 357 इन्द्रा पार्क नजफगढ़ न०दि०	-do-	P P S P P P P P P S P P P P P P	14		1819=00	Paid हंसराज 13/8/07
	Daily Total		6 6 6 6 6 6 6 6 6 6 6 6 6 6	252	G. Total	32742=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.

M.O.No. D/542/PH/M.O.H/07, dt. 6.7.07

HEALTH DEPARTMENT

MUSTER ROLL NO. 3710 (From 15-6-07 To 30-6-07)

(Daily wages recommd. A.M.O. Cond. sheet No. 2.

Circle No. 5 & 6 Voucher No. Dated

In continuation of Muster Roll No. Fresh

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	सुरेन्द्र S/o श्री मेघ सिंह गाँव खामनौली चुल सिवस दिल्ली पर	A.M.O. Daily Wages	P P S P P P P P P S P P P P P P	14		1819=00 Paid	Surender Kumar 13/8/07
8	शाकिन पाल S/o श्री रन सिंह C.W.C / H-5 सरोजनी नगर नदि-23	-do-	P P S P P P P P P S P P P P P P	14		1819=00 Paid	शाकिन पाल 13/8/07
9	पवन कुमार S/o श्री किशनलाल वाही G-11 अलीगंज नदि 03	-do-	P P S P P P P P P S P P P P P P	14		1819=00 Paid	पवन कुमार
10	मुकेश कुमार S/o ओम प्रकाश	-do-	P P S P P P P P P S P P P P P P	14		1819=00 Paid	मुकेश कुमार 13.8.07
11	अरुण कुमार S/o श्री. हरि ओम	-do-	P P S P P P P P P S P P P P P P	14		1819=00 Paid	अरुण कुमार 13.8.07
12	अमर जीत S/o श्री पुरन चन्द	-do-	P P S P P P P P P S P P P P P P	14		1819=00 Paid	
	Daily Total		6 6 S 6 6 6 6 6 6 S 6 6 6 6 6 6	168	G. Total	21828=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.

Sanitation Officer Chief Sanitation

O.O. No. D/542/PA/M.O.H./07, dt. 6-7-07

HEALTH DEPARTMENT

MUSTER ROLL NO. 3710 (From 15-6-07 To 30-6-07)

(23) Dailywager seasonal A.M.G. Only Five sheets (1+4=5)

Circle No. 5 & 6 Voucher No. ..... Dated .....

In continuation of Muster Roll No. Fresh

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 ... (14)	Total	Rate Rs. P.	Amount Rs. Paid	Sign. or thumb impression of payee and dated initials of paying officer made at the time of payment
1	सुनिल S/o बरसाते लाल	A.M.G	P S P P P P P S P P P P P P	14		1819=00	Sd/- Sd/-
2	राजबीर S/o श्री दयानन्द G-1 अलीगंज लोधी कालोनी न०दि०3	do	P S P P P P P S P P P P P P	14		1819=00 Paid	राजबीर Sd/-
3	सन्तोष S/o श्री राम जगत M-S-16 अलीगंज लोधी कालोनी	do	P S P P P P P S P P P P P P	14		1819=00 Paid	13/8/07 Sd/-
4	शिव कुमार S/o श्री ब्रह्मानन्द S 162 पांडव नगर मदर डेयरी दि०92	do	P S P P P P P S P P P P P P	14		1819=00 Paid	Shi Kumar 13-8-07 Sd/-
5	चन्दर भाल S/o श्री पी० एन० शुक्ला हनुमान मन्दिर गोल मार्किट दिल्ली 01	do	P S P P P P P S P P P P P P	14		1819=00 Paid	चन्दर भाल 14/8/2007 Sd/-
6	सुरेन्द्र S/o श्री रामस्वरूप एन 793 मंगोल पुरी दिल्ली-83	do	P P S P P P P P S P P P P P	14		1819=00 Paid	Surender 13-8-07 Sd/-
	Daily Total		6 6 5 6 6 6 6 6 6 5 6 6 6 6 6 6	84	G. Total	10914=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.