Approval No. 2930/PS/Chairman, dt-11-6-07

HEALTH DEPARTMENT

MUSTER ROLL NO. 3706 (From 2-7-07 To 31-7-07)

(23) Daily wager S.K.S/L.B Cont. Sheet No. 4.

Circle No. XIV Voucher No. 83/H Dated 13/8/07

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 accrding to classes	Designation	Dates From ... To ... (1–31)	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
17	Smt. Anju W/O Sh. Chander Pal	Daily wager		26 days	127.14 + CA	3376 3378-	Attested
18	Smt. Rachna W/O Sh. Sanjay C-44, Gali No 2, Nai Simapuri Delhi.	Daily wager		25 days.	11	3246 3249-	Attested
19	Smt. Mahendri W/O Sh. Jai pal H. No. 112, Sec-3, Golmarket N.D.	do -		26 days	4	3376 3378-	Attested
20	Smt. Anita W/O Sh. Sonu A-440, Sanjay Camp, Daxinpuri N.D.	do -		26 days.	4	3376 3378-	Attested
21	Smt. Mithlesh W/O Sh. Sham Sher Singh 1272, Karol Bagh N.D.	do -		26 days.	4	3376 3378-	
22	Vinod S/O Sh. Harichand 8, N.D.M.C. Multistory, Atagarj N.D.	do -		23 days.	11	2986 2989	Attested
23	Parveen S/O Sh. Raju			20 days.	11	2597 2599-	
			Daily Total	545	G. Total	70764-2 70816=00	
			Initials of person marking the daily attendance				
			Initials of Inspecting Officer				

Pay to Staff Rs. 70816=00

Pay Rs. 70816=00 (Rupees Seventy thousand eight hundred sixteen only)

Fully paid and all signature has attested.

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

Sr. A.O (PH) 13/8/07

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.	P.

Approval No. 2930/AS/Chairman, dt - 11-8-07

HEALTH DEPARTMENT

MUSTER ROLL NO. 3706 (From 2.7.07 To 31-7-07)

(27) Dailywages S.K.S/P.B. Cont. sheet No. 3.

Circle No. XIV 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 accrding 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	Bishnu S/O Sh. Mangal Singh	Dailywager		26 days.	12-74 + CA	31833 3376 3378-	
12	Naveen Kumar S/O Sh. Shankerlal Add: 35/13, Trilokpuri N.D.	-do-		23 days.	11	2986 2989-	
13	Jitendra S/O Sh. Shivpal Add: A/4, Sharadpuri, Naigmapuri N.D.	-do-		25 days	11	3246 3249-	
14	Ravi S/O Sh. Baljeet Add: A-133, Jwalapuri N.D.	-do-		24 days.	11	3116 3119-	
15	Sh. Joginder S/O Sh. Kishan Lal	-do-		24 days.	11	3116 3119-	
16	Smt. Saroj W/O Sh. Shyam Singh	-do-		06 days.	11	779 780-	
	Daily Total			273	G. Total	48431-	
	Initials of person marking the daily attendance			373		48467-00	
	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.

Approval No. 2930/AS/Chairman, dt. 11-6-07

HEALTH DEPARTMENT

MUSTER ROLL NO. 3706 (From 2.7.07 To 31-7-07) (23 Daily wager S/Ks/L.Bs Cand. Ward No. 2.)

Circle No. XIV 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 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	Ajay S/o Laxman H.8. Nagathori Park Delhi 53	Daily wager		25 days	127.00 + CA	3246 3249-	345121 Attested
7	Vikas Lehras S/o Sh. Chaman lal	-do-		26 days.	11	3376 3378-	VIKAS Attested
8	Arun Kumar S/o Sh. Omprakash Add:- 5/34, Trilokpuri N.D.	-do-		25 days.	11	3246 3249-	Arun Kumar Attested
9	Sandeep S/o Sh. Rajpal Add:- 3/310, Trilokpuri N.D.	-do-		26 days.	11	3376 3378-	Sandeep Attested
10	Sachin S/o Sh. Dheer Singh	-do-		13 days	11	1688 1689-	Attested
	Daily Total			245	G. Total	318127 31833=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.

Approval No. 2930/AS/Chairman, dt. 11-6-04

HEALTH DEPARTMENT

MUSTER ROLL NO. 3706 (From 2.7.07 To 31-7-07)

(23) Sailywager S.K.S/L.B
Only Four sheets (1+3=4)

Circle No. XIV 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 ... 1–31	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	Sh. Gurdeep Kumar S/o Mausiram H.No 263 Sunlight Colony N.D. 14		P P P P P P S P P P P P P S P P P P P P S P P P P P P