# HEALTH DEPARTMENT

Contra Sheet – II

## MUSTER ROLL NO. 4020 (From 01/02/08 To 29/02/08)

Circle No. XI Voucher No. 254/17 Dated

In continuation of Muster Roll No. 3973 31/3/08

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 (1–31) | 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. | SH. Amod Kumar S/o Vishnu Ram. D/S F/3 Paithan Ray Lane M 20 | D/W. | | 25 days | 133-45 + CA. | 3402-00 | |
| 12. | SH. DEEPAK S/o SH. Surajeet. S. 20 Mander Marg M 20 | D/W. | | 25 days | -do- | 3402-00 | Deepak |
| 13. | SH. Mohit S/o SH. Narayan. 9/160 Dakshi Puri | D/W | | 25 days | -do- | 3402-00 | Mohit |
| | | | Daily Total | 321 days | G. Total | 43682-00 | |
| | | | Initials of person marking the daily attendance | | | | |
| | | | Initials of Inspecting Officer | | | | |

Pay Rs. 43682/- (Rupees Forty three thousand six hundred Eighty two only)

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 ... Rs. P.

To S.No. 1 to 13 A/C Thumb & Signature Attested and fully Paid

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

Total amount paid (in words) Rupees ..... Balance Paid

CANCELLED Released for Payment

VERIFIED FOR CASH/CHEQUE PAYMENT

Receipt 17/3/08 10-10 AM Entry No. 495 Page No. 21 Serial No. 4145

# HEALTH DEPARTMENT

## MUSTER ROLL NO. 4020 (From 01/02/08 To 29/02/08)

Contd. Sheet – I

Circle No. XI Voucher No. ..... Dated .....

In continuation of Muster Roll No. 3973

PART-NOMINAL-ROLL

Accountant (HG) CHIEF MEDICAL OFFICER

| S.No. | Name, Father's/Husband's Name & Address grouped accc rding 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 |
|---|---|---|---|---|---|---|---|
| 6. | SH. Kuldeep S/O SH. ~~Shaymlal~~ Sohanlal Jhuggi No 1059 Harshandun | DLW | | 25 days (123 days) | 133.45 + C.A. | 3402-00 (16,738-00) | Paid |
| 7. | SH. Ramjiya S/O SH. Lakhmichand 256 Madangir N.D | DO | | 25 days | -do- | 3402-00 | Paid |
| 8. | SH. Sachin S/O SH. Madhan Lal 21/142 Jaslok Puri | DO | | 25 days | -do- | 3402-00 | Paid |
| 9. | SH. Raju S/O SH. Munshi Lal 1011 Sultan Puri N.D | DO | | 25 days | -do- | 3402-00 | Paid |
| 10. | SH. Laxman S/O Munna Lal M-85 Ali Ganj N.D | DO | | 23 days | -do- | 3130-00 | Paid |
| | Daily Total | | | 246 days | G. Total | 33476-00 | |
| | 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.

Sanitation Officer

Grand Total of this Muster Roll ... ... ... ... ... Rs. P.

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

Total amount paid (in words) Rupees ..... Balance Paid

O.O.No - 1226/D/PA/MCD Dt. 20/12/07
approval Chairman No - 7426/D/PS. Dt. 20/11/07.

(13) clarity copy 9K, 4/B

# HEALTH DEPARTMENT

(1+2) Total Sheet = 3.

## MUSTER ROLL NO. 4020 (From 01/02/08 To 29/02/08)

Circle No. XI Voucher No. ..... Dated .....

In continuation of Muster Roll No. 3973

PART-NOMINAL-ROLL

Accountant (HG) CHIEF MEDICAL OFFICER

| 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 |
|---|---|---|---|---|---|---|---|
| 1. | Sh. Pappu S/o Sh. Shyam Lal. J-II H. No. 6 Madangiri | D/W | S A S S S A S S | 23 days | 133.45 + C.A. | 3130-00 | |
| 2. | Smt. Bimla W/o Sh. Narender. 4/166 Bapu Dham | Do | S S S S | 25 days | do | 3402-00 | |
| 3. | Smt. Anita W/o Sh. Subash 5/344 Dakshinpuri | Do | S S S S | 25 days | do | 3402-00 | अनिता |
| 4. | Smt. Vijeta W/o Sh. Rajkumar. 1/60 Bapu Dham N.D | Do | S S S S | 25 days | do | 3402-00 | विजेता |
| 5. | Sh. Surender S/o Sh. Om Prakash. D/S 17 Ali Ganj N.D | DW | S S S S | 25 days | do | 3402-00 | |
| | Daily Total | | 5 5 5 4 5 5 5 5 5 5 5 5 4 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5 | 123 days | G. Total | 16,738-00 | |
| | 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. |
|---|---|
| | |