HEALTH DEPARTMENT

199/H. 31/3/08

Conter sheet – II

MUSTER ROLL NO. 4071 (From 20/2/08 To 29/2/08)

Circle No. IV Voucher No. .... Dated ....

In continuation of Muster Roll No. Fresh.

PART-NOMINAL-ROLL

Accountant (HG), 10210-00 CHIEF MEDICAL OFFICER

S.No.	Name, Father's/Husband's Name & Address grouped according to classes	Designation	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	Sh. Sunil Kr. S/o Inderjit H.No-33, Har Keshi Nagar, Okhla Tomk. N. Delhi-20	D/W S/K																						P	P	S	P	P	P	P	P			07	133.45 +66.00	953-00	सुनील Sig Alter
12	" Raj Kumar S/o Tej Pal WZ-128, Harijan colony Tilak Nagar N. Delhi	"																						P	S	P	P	P	P	P	P			06	11	817-00	21 [illegible] Sig Alter
13	Smt Laxami W/o Suburh chand H.No 131 Block No. 2 Mir Dard Lane Delhi	"																						P	S	P	P	P	P	P	P			06	11	817-00	[illegible] Sig Alter
14	Sh. Salekh S/o Kundan Lal F-11-200. Madangiri N. Delhi = 110062	"																									P	P	P	P	P			05	11	680-00	Sig Alter
	Pay to staff Rs 13477—																																				
	Daily Total																									S								99	G. Total	13477-00	
	Initials of person marking the daily attendance																									S											
	Initials of Inspecting Officer																									S											

Pay Rs. 13477/- (Rupees Rs Thirteen thousand four hundred seventy seven only)

Recd on 10/3/08 at 10.40 AM. Entry the page vide Reg serial No. 457.

A.A.O. (HEALTH)

CANCELLED
Released for Payment
Sr. A.O.

Grand Total of this Muster Roll ... ...

Accountant (HG)

M.O.H.

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.

Bill subject to that: The officer disbursing the wages must record complete residential address of officials at S.No 8 & 9 on this m.Roll before disbursing payment to them.

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

All Sig Altered

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

Rs.	P.

HEALTH DEPARTMENT

Contd. Sheet-I

MUSTER ROLL NO. 4071 (From 20/2/08 To 29/2/08)

Circle No. IV Voucher No. .... Dated ....

In continuation of Muster Roll No. Fresh.

Accountant (HG), CHIEF MEDICAL OFFICER

PART-NOMINAL-ROLL

5445-00

S.No.	Name, Father's/Husband's Name & Address grouped according to classes	Designation	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.	Rate P.	Amount Rs.	Amount P.	Sign. or thumb impression of payee and dated initials of paying officer made at the time of payment
6	Sh Manish s/o ~~Surinder~~ Sunil (Dutt) Add:- G-9, Ali Ganj N.D.	D/W S.K.																					P	P	P	S	P	P	P	P	P	—		08	133.45 +66.00		1089-00		Manish
7	Smt. Suman w/o Ramesh Chand Add:- 14/16 Rakshit Puri Delhi	"																						P	P	S	P	P	P	P	P	—		07	"		953-00		Brijesh
8	Smt. Seema W/o Mahinder	"																						P	P	S	P	P	P	P	P	—		07	"		953-00		[illegible]
9	Sh. Sunil s/o Ramy	"																						P	P	S	P	P	P	P	P	—		07	"		953-00		[illegible]
10	" Nand Kishore s/o Roshanlal B-1311, Gali No-3 Sangam Vihar N. Delhi-52	"																							P	S	P	P	P	P	P	—		06	"		817-00		[illegible]
	Daily Total																									S						—		75	G. Total		10210-00		
	Initials of person marking the daily attendance																						[illegible]	[illegible]	[illegible]	S	[illegible]	[illegible]	[illegible]	[illegible]	[illegible]	—							
	Initials of Inspecting Officer																									S		[illegible]				—							

Pay Rs. .... (Rupees ....)

Grand Total of this Muster Roll ... ...

Rs.	P.

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.

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

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

O.O. No – 162/D/PA/MOH Dt. 22/2/08

(14) daily wager SK, 2/13 @ 133.45 +DA.

HEALTH DEPARTMENT

(1+2) Total Sheet = 3.

MUSTER ROLL NO. 4071 (From 20/2/08 To 29/2/08)

Circle No. IV Voucher No. .... Dated ....

In continuation of Muster Roll No. Fresh.

Accountant (HG), CHIEF MEDICAL OFFICER

PART-NOMINAL-ROLL

Dates From .... To ....

S.No.	Name, Father's/Husband's Name & Address grouped according to classes	Designation	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.	Smt. Premwati w/o Kazar H.No-15 Balmiki Sadan Mandir Marg, N. Delhi	D/W SK																					P	P	P	S	P	P	P	P	P	—		08	133.45 +66.00	1089-00	Paid
2.	" Sunita w/o Sachdev H-N/08-1 Balmiki Sadan Mandir Marg N. Delhi — Mandir Marg	"																					P	P	P	S	P	P	P	P	P	—		08	"	1089-00	Paid
3.	Sh. Mohanlal s/o Hublal B-1708, Holambi Kalan Metro Vihar-II. N. Delhi –	"																					P	P	P	S	P	P	P	P	P	—		08	"	1089-00	
4.	" Kuldeep s/o Ranjit Singh 11/166, Bapu Dham. Delhi —	"																					P	P	P	S	P	P	P	P	P	—		08	"	1089-00	Kuldeep
5.	Smt. Veena w/o Chand Kr. 35, Balmiki Basti Mandir Marg N. Delhi – 01.	"																					P	P	P	S	P	P	P	P	P	—		08	"	1089-00	
	Daily Total																									S						—		40	G. Total	5445-00	
	Initials of person marking the daily attendance																									S											
	Initials of Inspecting Officer																									S						—					

Pay Rs. .... (Rupees ....)

Rs.	P.

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