D-2-16-12(P)

HEALTH DEPARTMENT

MUSTER ROLL NO. 4210 (From 1/5/08 To 31/05/08)

Contd. sheet-9.

Circle No. VII Voucher No. 47/H Dated

In continuation of Muster Roll No. 4169 11/6/08

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 ... 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
48	Sh. Ashok S/o Sh. Narayan Dass R/o H.No. 1157 Tisna Tikri N. Delhi.	DLW SK		21 days	135 + NA	2835-00	48
49	Sh. Gaurav S/o Sh. Vijay R/o 81 Manjha Bulandmachar Mehrauli Delhi	do		07 days		964-00	49
50	Sh. Sandeep S/o Sh. Ram Ratten R/o B-711 Budh Nagar Jindar Puri N Delhi			27 days		3718-00	50
51	Sh. Nitish Kumar S/o Sh. Subhash Chand R/o 525 Algami 200 Nirman N Delhi. Pay to Staff Rs 174603/-			27 days		3718-00	51
	Daily Total			1268 days		174741-00	
	Initials of person marking the daily attendance					174603-00	
	Initials of Inspecting Officer						

Pay Rs. 174741/- (Rupees One lakh Seventy four thousand Seven hundred Forty One only)

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.

VERIFIED FOR CASH/CHEQUE PAYMENT
M.O.H. Sr. A.O
Head Cashier

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

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

Rs. P.

Pay Rs 174603/- (Rs One lakh Seventy four thousand Six hundred three only)

Received on 4/6/08 at 3 PM. Entry in page no 25 serial No. 622

HEALTH DEPARTMENT

Conser. sheet 8

MUSTER ROLL NO. 4210 (From 1/5/08 To 31/5/08)

Circle No. VII Voucher No. .... Dated ....

In continuation of Muster Roll No. 4169.

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	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
			1076		~~148,3~~ 148,165-00 Total ~~148,165-00~~	
43	Sh. Rakesh S/o Sh. Suresh R. B-23 Palika Dham Gol Mkt N Delhi	DLW SK	11 days + CA	~~135-~~	1515-00	Paid Rakesh (43)
44	Sh. Aman Kumar S/o Sh. Rajender R. [illegible] Gokhle Market of Kailash N Delhi	do	27 days	72-	3715-00	Paid Kumar (44)
45	Sh. Pawan Kumar S/o Sh. Om Prakash H. No. 262 Village Mubarakpur	do	22 days	do	3029-00	Paid [illegible] (45)
46	Sh. Mahesh S/o Sh. Suresh R. B-23 Palika Dham Gol Market N Delhi	do	27 days	do	3718-00	Paid Mahesh (46)
47	Sh. Priyanshu S/o Sh. Ashok Kumar R. H.No. 123 Village Nangal(?) [illegible] Delhi	do	23 days	do	3167-00	Paid Priyanshu (47)
	Daily Total		1186 days		Total ~~163,45~~ 163,312-00	
	Initials of person marking the daily attendance				163312-00	
	Initials of Inspecting Officer					

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

HEALTH DEPARTMENT

MUSTER ROLL NO. 4210 (From 1/5/08 To 31/5/08)

Contd. Sheet – 7

Circle No. VII Voucher No. ..... Dated .....

In continuation of Muster Roll No. 4169

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 ... (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
38	Smt Asha W/o Sh Deepak Kumar R/o 37356 Tilak Puri Delhi.	DIW SK		27 days	+ CA	3718-00	31/5/11 (38)
39	Smt Sohanwati W/o Sh Chander Bhan R/o 2/17 Batu Pham N Delhi	do		26 days	do	3580-00	31/5/11 (39)
40	Smt Aruna W/o Sh Naresh R/o Shiv Mahakali Mandir Mustafabad 2nd Rd. N Delhi.	do		Nil	do	NIL	NIL (40)
41	Smt Sarda W/o Sh. Ramesh R/o 21704 Dakshin Puri N Delhi	do		26 days	do	3580-00	सारदा (41)
42	Sh Sushil Kumar S/o Sh. Mahipal R/o H.No. 5569 Mandir Marg N Delhi	do		27 days	do	3718-00	(42)
	Daily Total			1076 days	Grand Total	148,165-00	148303
	Initials of person marking the daily attendance						148165-00
	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

Rs.	P.

HEALTH DEPARTMENT

MUSTER ROLL NO. 4210 (From 1/5/08 To 31/5/08)

Contd. Sheet – VI

Circle No. VII Voucher No. ..... Dated .....

In continuation of Muster Roll No. 4169

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
32	Sh. Jitender Kumar S/o Sh. Ramkishan Shad R/o Tilak Vihar Harijan Colony N.Delhi	DLW Sd	P P P S P P P P P S P P P P P P S P P P P P S P P P P P S P P P P P	27 days	138.20 + CA	3718-00 3718	Paid (Sd) (32)
33	Sh. Rajender Kumar S/o Sh. Daya Chand R/o 20-J Block F Dakshin Puri N.Delhi	do	P P P S P P P P P S P P P P P P S P P P P P S P P P P P S P P P P P	27 days	do	3718	Paid (Sd) (33)
34	Sh. Vikash S/o Sh. Dayaram R/o A 812 Jawala Puri Delhi	do	P P P S P P P P P S P P P P P P S P P P P P S P P P P P S P P P P P	27 days	do	3718-00	Paid (Sd) (34)
35	Sh. Nemdhari S/o Sh. Jai Karan R/o 167 Shahid Capt. Tuglakabad Extn. N.Delhi	do	P P P S P P P P P S P P P P P P S P P P P P S P P P P P S P P P P P	27 days	do	3718-00	Paid (Sd) (35)
36	Sh. Rajesh S/o Sh. Harkesh Kumar R/o B2-11 Sagar Pur N.Delhi	do	P P P S P P P P P S P P P P P P S P P P P P S P P P P P S P P P P P	27 days	do	3718-00	(Sd) (36)
37	Smt. Dayawati W/o Sh. Subhash R/o 40 Balmiki Sadan Mandir Marg N.Delhi	do	P P P S P P P P P S P P P P P P S P P P P P S P P P P P S P P P P P	27 days	do	3718-00	Paid Strictly not to pay for want of service of complete essential address (Sd) 10-6-08 (37)
	Daily Total		S S S S S	970 days	Total	133569-00	
	Initials of person marking the daily attendance		W W W S W W W W W S W W W W W W S W W W W W S W W W W W			133569-00	
	Initials of Inspecting Officer		M S M S M				

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

Rs.	P.

HEALTH DEPARTMENT

MUSTER ROLL NO. 4210 (From 1/5/08 To 31/5/08)

Cover Sheet-II

Circle No. VII Voucher No. ..... Dated .....

In continuation of Muster Roll No. 4169

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
27	Smt Beena W/o Sh. Naresh Chand R/o 245 T. Nuts C.T. with Sam Owd MCD-NDMC	Sood DLW SK		26 day	135-45 + CA	3558-00	(27) बीना Sim
28	Smt Suman W/o Sh. Rajender R/o 21, P/Stony Abadi Gujjar Lodhi Rd. N.Delhi	do		23 day	do-	3167-00	(28) सुमन
29	Smt Sonu W/o Sh. Ashok R/o 234 Tilak Vihar Delhi.	do		27 day	do-	3718-00	(29) सोनू
30	Smt Neetu W/o Sh. Hira Lal R/o Harijan Basti Mandir Marg Owd 38 N.Delhi	do		27 day	do-	3718-00	Strictly not to pay granted of leaving of complete residential address 10.6.08 (30) नीतू
31	Smt Sunita W/o Sh. Bhindar R/o Village Badli Balmiki Mandir Delhi	do		24 day	do-	3305-00	(31) सुनीता
	Daily Total			808 day	G. Total	11361-00	
	Initials of person marking the daily attendance						
	Initials of Inspecting Officer						

~~11390~~

11361-00

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

Rs.	P.

HEALTH DEPARTMENT

MUSTER ROLL NO. 4210 (From 1/5/08 To 31/5/08)

Contd. Sheet-IV

Circle No. VII Voucher No. ..... Dated .....

In continuation of Muster Roll No. 4169

PART-NOMINAL-ROLL

Accountant (HG) | CHIEF MEDICAL OFFICER

S.No.	Name, Father's/Husband's Name & Address grouped accccrding 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
22	Sh. Ajay S/o Sh. Harikishan R/o 76 Harijan Basti Mamoori marg N. Delhi	DLW SK	S	S	S	S	S	S	S	S	S	S	S	S	S	S	S	S	S	S	S	S	S	S	S	S	S	S	S	S	S	S	S	25 days	138-25 + CA	3442-00	(ASO) 22
23	Sh. Premkumar S/o Sh. Hemraj Chand R/o H.B. Ashok Chauhan Gol market N. Delhi	Chand do	S	S	S	S	S	S	S	S	S	S	S	S	S	S	S	S	S	S	S	S	S	S	S	S	S	S	S	S	S	S	S	24 days	do	3305-00	23
24	Sh. Sat Pal S/o Sh. Lal Chand R/o 149 Aligaj N. Delhi	do	S	S	S	S	S	S	S	S	S	S	S	S	S	S	S	S	S	S	S	S	S	S	S	S	S	S	S	S	S	S	S	27 days	do	3718-00	24
25	Sh. Mahesh S/o Sh. Ramji Lal R/o A-19 Mangla Puri Palam N. Delhi	do	S	S	S	S	S	S	S	S	S	S	S	S	S	S	S	S	S	S	S	S	S	S	S	S	S	S	S	S	S	S	S	27 days	do	3718-00	25
26	Sh. Krishan S/o Sh. Karan Singh R/o H.H. 20/1 Sewak Nagar Najafgarh N. Delhi	do	S	S	S	S	S	S	S	S	S	S	S	S	S	S	S	S	S	S	S	S	S	S	S	S	S	S	S	S	S	S	S	26 days	do	3580-00	26
	Daily Total				S						S									S							S							68 days	Grand Total	93773-00	
	Initials of person marking the daily attendance		S	S	S	S	S	S	S	S	S	S	S	S	S	S	S	S	S	S	S	S	S	S	S	S	S	S	S	S	S	S	S			93773-00	
	Initials of Inspecting Officer				S						S									S							S										

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

HEALTH DEPARTMENT

MUSTER ROLL NO. 4210

Circle No. VII Voucher No. ..... Dated .....

(From 1/5/08 To 31/5/08)

In continuation of Muster Roll No. 4169

Cover Sheet-III

K.

PART-NOMINAL-ROLL

Accountant (HG), CHIEF MEDICAL OFFICER

S.No.	Name, Father's/Husband's Name & Address grouped accccrding 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
16	Sh. Anil S/o Sh. Shyam Singh, R/o 167 Sahid Capt Tajgeta Bed EPT. N-Delhi	D/W SK	P P P	P P P	P P P	S	P P P	P P P	P P P	P P P	P P P	S	P P P	P P P	P P P	P P P	P P P	S	P P P	P P P	P P P	S	P P P	P P P	P P P	S	P P P	P P P	P P P	P P P	P P P	P P P	27 days	138.45 + CA	3718-00	ANIL (16) Sign Attested Kumar ASI-7
17	Smt Darshana W/o Sh. Vishal R/o 19 Masjid Moth N-Delhi	-do-	P P P	P P P	P P P	S	P P P	P P P	P P P	P P P	P P P	S	P P P	P P P	P P P	P P P	P P P	S	P P P	P P P	P P P	S	P P P	P P P	P P P	S	P P P	P P P	P P P	P P P	P P P	P P P	27 days	-do-	3718-00	दर्शना (17) Sign Attested Kumar ASI-7
18	Sh. Vinod Kumar S/o Sh. Kalu Ram R/o 6296 Gali Ravi Dass Navi Kotinder N-Delhi		P P P	P P P	P P P	S	P P P	P P P	P P P	P P P	P P P	S	P P P	P P P	P P P	P P P	P P P	S	P P P	P P P	P P P	S	P P P	P P P	P P P	S	P P P	P P P	P P P	P P P	P P P	P P P	26 days	-do-	3580-00	(18) Sign Attested Kumar ASI-7
19	Smt Saroj W/o Sh. Bijender R/o 171 Neb Sarai N-Del	-do-	P P P	P P P	P P P	S	P P P	P P P	P P P	P P P	P P P	S	P P P	P P P	P P P	P P P	P P P	S	P P P	P P P	P P P	S	P P P	P P P	P P P	S	P P P	P P P	P P P	P P P	P P P	P P P	27 days	-do-	3718-00	सरोज (19) Sign Attested Kumar ASI-7
20	Smt Manni W/o Sh. Birjesh R/o 572/10 Inderlok New Khanna Mkt Lodhi Rd.	-do-	P P P	P P P	P P P	S	P P P	P P P	P P P	P P P	P P P	S	P P P	P P P	P P P	P P P	P P P	S	P P P	P P P	P P P	S	P P P	P P P	P P P	S	P P P	P P P	P P P	P P P	P P P	P P P	27 days	-do-	3718-00	मन्नी (20) Sign Attested Kumar ASI-7
21	Smt Rukmani W/o Sh. Bhuth Ram R/o 2551 EE Jahandir Puri N-Delhi	-do-	P P P	P P P	P P P	S	P P P	P P P	P P P	P P P	P P P	S	P P P	P P P	P P P	P P P	P P P	S	P P P	P P P	P P P	S	P P P	P P P	P P P	S	P P P	P P P	P P P	P P P	P P P	P P P	26 days	-do-	3580-00	रुकमणी (21) Sign Attested Kumar ASI-7
	Daily Total			S				S				S				S				S				S										552 days	Total	76,010-00	
	Initials of person marking the daily attendance			S				S				S				S				S				S													
	Initials of Inspecting Officer			S				S				S				S				S				S													

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

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.

M.O.H. Sr. A.O

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

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

Rs.	P.

HEALTH DEPARTMENT

MUSTER ROLL NO. 4210 (From 1/5/08 To 31/5/08)

Contd. Sheet II

Circle No. VII Voucher No. ..... Dated .....

In continuation of Muster Roll No. 4169.

PART-NOMINAL-ROLL

Accountant (HG) — CHIEF MEDICAL OFFICER

S.No.	Name, Father's/Husband's Name & Address grouped accccrding 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
10	Smt Seema W/o Sh. Sadhu Ram R/o Mandir Marg. N. Delhi.	P/W SK		25 days	138-24 + MCD	3442-00	NTP for Record only complete Sign Attested Kumar 10.6.08 (10)
11	Smt Rajwati W/o Sh. Gulab R/o P-I/394 Sultan Puri N Delhi	do		27 days	do	3718-00	21/06/11 Sign Attested Kumar (11)
12	Sh. Sanjay S/o Sh. Raj Singh R/o F-1794 Madipur JJ Camp N Delhi	do		23 days	do	3167-00	(12) Sign Attested Kumar
13	Sh. Neeraj S/o Sh. Vinod R/o H.N. 192 Kotla Pilangi Village N Delhi	do		26 days	do	3580-00	(13) Sign Attested Kumar
14	Sh. Kuldeep Kumar S/o Sh. Babu Lal R/o H.No 1589 Kotla Pilangi Village N Delhi	do		26 days	do	3580-00	Kuldeep (14) Sign Attested Kumar
15	Sh. Anil Kumar Rajotiya S/o Sh. Kalli Singh R/o 26 S/Shiny Pot Awas Atul Grover Rd N Delhi	do		26 days	do	3580-00	(15) Sign Attested Kumar
	Daily Total			392 days	Total	53978-00	
	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

Rs.	P.

HEALTH DEPARTMENT

MUSTER ROLL NO. 4210 (From 1/5/08 To 31/5/08)

Contersheet-I

Circle No. VII Voucher No. .... Dated ....

In continuation of Muster Roll No. 4169.

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 ... 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
																																	131 days	Tokens per day	18039-00	
6.	Sh Narender Kumar S/o Sh. Ved R/o Dr. Ambedkar Nagar D.I.Z. 22 N. Delhi	D/W SK	P	P	P	S	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	27 days	136.40 + CA C6th per month	3718-00	(signed) (6) NTP for want of complete residential address. V.g. 18-6-08
7.	Smt Arti S/o Sh. Manoj Kumar R/o J-297 Dakshin Puri N. Delhi	-do-	P	P	P	S	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	27 days		-do- 3718-00	(signed) (7)
8	Smt Rajni Bala W/o Sh. Kishan Lal H.No. 7/481 Block 7 Trilokpuri N. Delhi	-do-	P	P	P	S	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	27 days		-do- 3718-00	Rajni (8)
9	Smt Sumita W/o Sh. Jag Pal R/o Teen Murti Compound Qr. No. 9, N. Delhi	-do-	P	P	P	S	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	27 days		-do- 3718-00	(signed) (9) Remarks: Same as above shown. V.g. 18.6.08
	Daily Total					S							S							S							S							239 days	Total C/F	32,911-00	
	Initials of person marking the daily attendance																																				
	Initials of Inspecting Officer																																				

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

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.

M.O.H. Sr. A.O

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

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

O.O.No- D/69/CMO(HQ) DT 11/3/08

(51) daily wages S/K, C/B @ 135.00 per day ebb/pm

(179) Total Sheet = 10.

HEALTH DEPARTMENT

MUSTER ROLL NO. 4210 (From 1/5/08 To 31/5/08)

Circle No. VII Voucher No. .... Dated ....

In continuation of Muster Roll No. 4169.

PART-NOMINAL-ROLL

Accountant (HG).

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 per day 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. Ajay Kumar S/o Sh. Billoo R/o 221, J.J. Sunlight Colony, N. Delhi	D/W S/K	P	P	P	S	P	P	P	P	P	P	S	P	A	P	P	P	P	S	P	P	P	P	P	P	S	P	P	P	P	P	P	26 days	135.00 + GA ebb/pm	3550.00	अजय कुमार (1)
2	Sh. Deepak S/o Sh. Ram R/o Aliganj Lodhi Rd. H.No. 29 Delhi	-do-	P	P	P	S	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	27 days	-do-	3718.00	दीपक (2) NTP for want of Residence of Complete Residential address
3	Sh. Naveen Kumar S/o Sh. Satyawan R/o H. H.No. 219 Village Masoodpur Delhi	-do-	P	P	P	S	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	27 days	-do-	3718.00	नवीन (3)
4	Sh. Pradeep S/o Sh. Surender R/o H.No. 217 Village Masoodpur	-do-	P	P	P	S	P	P	P	A	A	P	S	P	P	P	A	P	P	S	P	P	P	P	P	P	S	P	P	P	P	P	P	24 days	-do-	3305.00	Pardeep (4)
5	Sh. Krishan S/o Sh. Dalip R/o Gautam Nagar N. Delhi	-do-	P	P	P	S	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	27 days	-do-	3718.00	कृष्ण (5)
	Daily Total					5							5							5							5							131 days	Total c/f	18039.00	
	Initials of person marking the daily attendance																																				
	Initials of Inspecting Officer																																				

Verified 10-6-08

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

Accountant (HG)

M.O.H.

Sr. A.O

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

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.

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