HEALTH DEPTT.
CIRCLE NO X

List of B.F. R.M.R Safai Karamchari C. NO X is as under.

S.No.	name of Employees	designation	Amounts	Remarks.
(1)	Sh. Ranbir S/o Sh. Ramlal	S/K	45	
(2)	Sh. Sanjeev S/o Sh. Phool singh	S/K	45	
(3)	Sh. Anil Kr S/o Sh. laxman	S/K	45	
(4)	Sh. Rani w/o Late Sh. Rohtash	S/K	45	
		Total Amounts	180	

HEALTH DEPARTMENT

MUSTER ROLL No. R.M.R (S/K+C+B) (From 01/04/08 To 30/4/08)

Circle No. X Voucher No. 79/H 12/6/08 Dated

In continuation of Muster Roll No.

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
6.	Smt. Ram w/o late Sh. Rohtash. O.O. No. F-19(1)156/80(E)/3869/GC-III dated 24/8/2002. Entry in P-27	S/K	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 S P P P P P P P	11 days	133.45	5440 − 135 = 5305 / 1496 − 45 = 1451	
7.	Sh. Fateh Singh S/o Sh. Aman Singh. Entry in P-27	S/K	A A A A A S A A A A A A A S A A A A A A A A A S A A A A A A A A A S A A A	NIL	do	NIL	
8.	Sh. Jashwant S/o Sh. Ram Singh. O.O. No. 1234/80/HE-III/GC-III dated 19/8/2002. Entry in P-27	S/K	A A A A A S A A A A A A A A A S A A A A A A A A A S A A A A A A A A A S A A A	NIL	do	NIL	
9.	Sh. Arunkr S/o Sh. Chander Bhan O.O. No. F-19(1)/156/80(E)/3869/SA-III dated 24/8/2002. Entry in P-27	S/K	A A A A A S A A A A A A A A A S A A A A A A A A A S A A A A A A A A A S A A A	NIL	do	NIL	
	Pay to the staff Rs. 6756 − B/F Rs. 180 − Bill bills paid separately						
			Daily Total	5	G. Total	6936 − 180 = 6756 −	
			Initials of person marking the daily attendance				
			Initials of Inspecting Officer				

Pay Rs. 6756/= (Rupees Rs. Six thousand seven hundred fifty six only)

Accountant (HG) M.O.H. Sr. A.O. CANCELLED (V. K. GOEL) Released for Payment AO (PH)

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

Grand Total of the Muster Roll ... Sig | LTI | REF | Attested from S.No 1 to 9 Paid fully

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

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

Rs.	P.

HEALTH DEPARTMENT

MUSTER ROLL No. R.M.R (S/K+U.B) From 01/04/2008 To 30/04/08

Circle No. X Voucher No. ..... Dated .....

In continuation of Muster Roll No. .....

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
1.	Sh. Ranbir Josh. Ramlal O.O. No. 3275/PA/DIR(P-I) dated 7/11/2002. Entry in MP-26 Page 26 Posted in MP-13	S/K	P P P