



HEALTH DEPARTMENT

MUSTER ROLL NO. 4252

Circle No. VII

Voucher No. 4210

Dated

(From 1/6/08 To 14/6/08)

Conductor-8

In continuation of Muster Roll No. ....

PART-NOMINAL-ROLL

S.No.	Name, Father's/Husband's Name & Address grouped according to classes	Designation	Dates From..... To.....																															Total	Accountant (HG)	CHIEF MEDICAL OFFICER (S)	Sign. or thumb impression of payee and dated initials of paying officer made at the time of payment			
			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							
43	Sh. Rakesh S/O Sh. Suresh Pl. D-23 Bellika Dhara Culmortal - War	PLC SH																																		17525	446	17525	17525	
44	Sh. Arman Kumar S/O Sh. Rajendra Pl. D-21 OPP Plot Dhalu Culmortal - War	PLC SH																																		16040	446	16040	16040	
45	Sh. Pawan Kumar S/O Sh. Om Prakash Pl. N-211 Village - Chumbharia Culmortal - War	PLC SH																																		15760	446	15760	15760	
46	Sh. Manoj Kumar S/O Sh. Suresh Pl. N-22 Bellika Dhara Culmortal - War	PLC SH																																		11600	446	11600	11600	
47	Sh. Syam Kumar S/O Sh. Ashok Kumar Pl. N-11-127 Village - Nurgul Culmortal - War	PLC SH																																		8840	446	8840	8840	
		Daily Total																																		51840	446	51840	51840	

Pay Rs. ....

Accountant (HG) M.O.H. Sr. A.O.

Grand Total of this Muster Roll ...

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

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.

Rs. P.

# HEALTH DEPARTMENT

**MUSTER ROLL NO.** 4852

(From 1/6/08 To 14/6/08)

*Cont Sheet-7*

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Circle No. VII Voucher No. 1810 Dated .....

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

**PART-NOMINAL-ROLL**

Accountant (HG)

CHIEF MEDICAL OFFICER (5)

Sign. or thumb impression of payee and dated initials of paying officer made at the time of payment

S.No.	Name, Father's/Husband's Name & Address grouped according to classes	Designation	Dates From..... To.....																															Daily Total	Initials of person marking the daily attendance	Initials of Inspecting Officer	
			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		Rs.		P.																														
38.	SM T Asha W/S N Debar K No 01336-7810k Punim. Sr	Keyer	P	P	P	P	P	P	P	P	P	P	P	P	P	P	P	P	P	P	P	P	P	P	P	P	P	P	P	P	P	P	P	1355-21	1855-21	31/8/11	<i>(Signature)</i>
39	SM R Sahanteti W/S M Chandar Rao No 2177 Bedadlam Nizulu-90	Keyer	P	P	P	P	P	P	P	P	P	P	P	P	P	P	P	P	P	P	P	P	P	P	P	P	P	P	P	P	P	P	P	1655-00	1855-00	21/9/11	<i>(Signature)</i>
40	SM N Anura W/S N Nareddy No 2177 Bedadlam Nizulu-90	Keyer	P	P	P	P	P	P	P	P	P	P	P	P	P	P	P	P	P	P	P	P	P	P	P	P	P	P	P	P	P	P	P	1111-00	1111-00	.....	<i>(Signature)</i>
41	SM L Sarda W/S N Konda No 2304 Dakshin Puri N.P.M	Keyer	P	P	P	P	P	P	P	P	P	P	P	P	P	P	P	P	P	P	P	P	P	P	P	P	P	P	P	P	P	P	1655-00	1655-00	21/2/11	<i>(Signature)</i>	
42	SM Sushik Kumar W/S N Mettao No 14 N.H. Jay Mada Nany N.P.M	Keyer	P	P	P	P	P	P	P	P	P	P	P	P	P	P	P	P	P	P	P	P	P	P	P	P	P	P	P	P	P	P	1222-00	1655-00	21/9/11	<i>(Signature)</i>	
			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	4760-00	65,644-00	.....	.....

Pay Rs. .....

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.** 4252.

(From 1/6/08 To 14/6/08)

Comd. Suet-B

Circle No. VII Voucher No. 4210

Dated

( )

7.

**PART-NOMINAL-ROLL**

S.No.	Name, Father's/Husband's Name & Address grouped according to classes	Designation	Dates From..... To.....																															Total	Accountant (HG)	Amount	Sign. or thumb impression of payee and dated initials of paying officer made at the time of payment
			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				
27	Smt Beeru upson N... Pl. 2nd FHUB CT Model S... Rud Market No. 4.	...	/	/	/	/	/	/	/	/	/	/	/	/	/	/	/	/	/	/	/	/	/	/	/	/	/	/	/	/	/	/	/	10 days	135-25	1379-00	...
28	Smt Surman W/Si Rajender Pl. 21 Pjstony Alagay Bodhi Rd No. 21/1	...	/	/	/	/	/	/	/	/	/	/	/	/	/	/	/	/	/	/	/	/	/	/	/	/	/	/	/	/	/	/	/	10 days	1655-00	...	
29	Smt Sam W/Si 2 Ashok Pl. 234 Tajlak Nihar Park	...	/	/	/	/	/	/	/	/	/	/	/	/	/	/	/	/	/	/	/	/	/	/	/	/	/	/	/	/	/	/	10 days	1574-00	...		
30	Smt Neetu W/Si Hemalal Pl. Homiyad W/Si Manoj ... Nung. nung.	...	/	/	/	/	/	/	/	/	/	/	/	/	/	/	/	/	/	/	/	/	/	/	/	/	/	/	/	/	/	12 days	1655-00	...			
31	Smt Sumita W/Si Dhiraj Pl. Village Badli Badli ... Mwal. Bhu	...	/	/	/	/	/	/	/	/	/	/	/	/	/	/	/	/	/	/	/	/	/	/	/	/	/	/	/	/	/	11 days	1576-00	...			
		Daily Total	/	/	/	/	/	/	/	/	/	/	/	/	/	/	/	/	/	/	/	/	/	/	/	/	/	/	/	/	/	35 days	49230-00	...			

Accountant (HG) ... CHIEF MEDICAL OFFICER (S)

on leave

Pay Rs. (Rupees) ... Initials of person marking the daily attendance ... Initials of Inspecting Officer

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.



# HEALTH DEPARTMENT

## MUSTER ROLL NO. 4958.

Circle No. VII Voucher No. .... Dated 1/6/08 To 14/6/08

In continuation of Muster Roll No. 4940

### PART-NOMINAL-ROLL

S.No.	Name, Father's/Husband's Name & Address grouped according to classes	Designation	Dates From..... To.....		Daily Total	Initials of person marking the daily attendance	Initials of Inspecting Officer	Pay Rs.	Rate per day	Total	Rs. P.	Sign, or thumb impression of payee and dated initials of paying officer made at the time of payment																		
			1	2									3	4	5	6	7	8	9	10	11	12	13	14	15	16	17	18	19	20
16	Amil Singhum Khatu No 17 Jalandhar Road Dist. N. W. P.	Q.A.								1655		1655	1655-00	Amil Singhum Khatu																
17	Smt. Darsheema Chh. N. D.	do								1655		1655	1655-00	Smt. Darsheema Chh. N. D.																
18	Anilod Kumar Singh Khatu No. 6296 Gali Parvi Khari Khatu Dist. N. W. P.	do								1516		1516	1516-00	Anilod Kumar Singh Khatu																
19	Smt. Sanyal Smt. Bijender Pr. 17 Hebsrain No. 20	do								1655		1655	1655-00	Smt. Sanyal Smt. Bijender Pr.																
20	Smt. Mumtaz Begum Kh. Singh Kh. 17 Hebsrain No. 20	do								1655		1655	1655-00	Smt. Mumtaz Begum Kh. Singh Kh.																
21	Smt. Rakmani Chh. Singh Kh. No. 257 E E Jalandhar Dist. N. W. P.	do								246		246	246-00	Smt. Rakmani Chh. Singh Kh.																
Grand Total of this Muster Roll ...												3392																		

Pay Rs. 3392 Rupees

Accountant (HG) [Signature]

CHIEF MEDICAL OFFICER (SI) [Signature]

One (100) Rupees

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

Rs. P.

Balance Paid

Correct Sheet - III

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# HEALTH DEPARTMENT

MUSTER ROLL NO. 4952

14/6/08

(From

1/6/08

To

14/6/08)

Comptroller I

R

Circle No. VII

Voucher No. 4910

Dated

In continuation of Muster Roll No. 4910

PART-NOMINAL-ROLL

S.No.	Name, Father's/Husband's Name & Address grouped according to classes	Designation	Dates From..... To.....																															Total	Rate of P.F. Rs.	Sign. or thumb impression of payee and dated initials of paying officer made at the time of payment		
			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					
6	Mr. Narendra Kumar Doshi Ved R.S.P. Vihar of Ambikapur Nagar Nara	DIV A.M.	P	P	P	P	P	P	P	P	P	P	P	P	P	P	P	P	P	P	P	P	P	P	P	P	P	P	P	P	P	P	P	P	12 days	13520	1655-00	<i>[Signature]</i>
7	Mr. Ardi Singh Manoj Kumar R.I. 297 Daktarhin Puri Nara	go	P	P	P	P	P	P	P	P	P	P	P	P	P	P	P	P	P	P	P	P	P	P	P	P	P	P	P	P	P	P	P	12 days	1655-00	<i>[Signature]</i>		
8	Mr. Rajni Bala Wajankar R.T. 481 Block 7 Tolarkhand D.M.	go	P	P	P	P	P	P	P	P	P	P	P	P	P	P	P	P	P	P	P	P	P	P	P	P	P	P	P	P	P	P	P	12 days	1655-00	<i>[Signature]</i>		
9	Mr. Krishna Vish Jagan R. Teen Murti compound Nara	go	P	P	P	P	P	P	P	P	P	P	P	P	P	P	P	P	P	P	P	P	P	P	P	P	P	P	P	P	P	P	P	108 days	14895-00	<i>[Signature]</i>		
Daily Total			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					
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					
Initials of Inspecting Officer			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					

Pay Rs. (Rupees)

Accountant (HG)

CHIEF MEDICAL OFFICER

C.M.O. on leave

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.

