O.O.No:- 69/CMO/HQ/D/Dt. 11/3/08.
Vide approval Chairman NDMC 462/D/Ps dt 16/1/08

(23)

(23) daily wages SK, L/B @ 135.25 +CA.

HEALTH DEPARTMENT

MUSTER ROLL NO. 107/H 4259. 1/2 (From 1/6/08 To 14/6/08)

(14) Total sheet = 5.

Circle No. XIV Voucher No. 18/7/08 Dated

In continuation of Muster Roll No. 4217 4217.

PART-NOMINAL-ROLL

Accountant (HG)

CHIEF MEDICAL OFFICER (SJ)

CMO (HQ) on Leave

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
21	Greetanjo Rajan. Khanpur Delhi	Daily wager SK.	S P P P P P S P P P P P S P P P P 16	12 days	Reset +CA 66/- PM	1655=00	Attested.
22	Satyaprakash S/o Dalat Ram R.P.Road Section Delhi	"	S P P P P P S P P P P P S P P P P 16	12 days	"	1655=00	Attested. 21-11-11/91
23.	Sandeep S/o Brham Pal. H/P 63 Madangir Delhi	"	S P P P P P S P P P P P S P P P P 16	12.	"	1655=00	Attested.
		Daily Total	S 3 3 3 3 3 S 3 3 3 3 3 S	270	G. Total	37231=00	
		Initials of person marking the daily attendance	S				
		Initials of Inspecting Officer	S				

Received on 3/7/08 at 11-55 AM. Entered Page No 27 Serial No 680.

Pay to Staff Rs 37231/-
BIR Le Nu
SA/le 37231/-

S6(HG) Pay Rs. 37231/- (Rupees Rs. Thirty Seven thousand two hundred thirty one only)

14-7-08.

CANCELLED
Received for Payment
M.O.H. Sr. A.O
16/7/08
(V.K. GOEL) AO (PH)

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

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

Deduct Payment made, as per details transferred to Register of

HEALTH DEPARTMENT

MUSTER ROLL NO. 4259

Circle No. XIV Voucher No. ..... Dated ..... (From 1/6/08 To 14/6/08)

Contd sheet - IV

In continuation of Muster Roll No. 4217

PART-NOMINAL-ROLL

Accountant (HG), CHIEF MEDICAL OFFICER (S) [signature] CMO(HQ) on Leave

S.No.	Name, Father's/Husband's Name & Address grouped according to classes	Designation	Dates From ... To ...	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	Vikash S/o Jailal Govind Puri Delhi	Daily Wager Sk.	S 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	17 / 174 / 12 days	135-CA FCA 66/- P.M	2399 / 1655=00	[signature]
17	Sohani W/o Om Parkash Thein Rughan Delhi	"	S 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	12 days	"	1655=00	[signature]
18	Deepak S/o Phulla Ram J-34 Anat Ram Delhi	"	S 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	12 days	"	1655=00	[signature]
19	Rameswar S/o Chawa Ram 26/1 Madangir Delhi	"	S 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	12 days	"	1655=00	[signature]
20	Savitri W/o Suresh 6/330 Trilak Ram Del	"	S 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	12 days	"	1655=00	[signature]
	Daily Total		S 20 20 20 20 20 20 20 20 20 20 20 20 20	234	G. Total	32266 00	
	Initials of person marking the daily attendance		[signature]				
	Initials of Inspecting Officer		S N S N				

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 ... ... Rs. P.

Deduct-Payment made

HEALTH DEPARTMENT

MUSTER ROLL NO. 4259. (From 1/6/08 To 14/6/08)

Contd-sheet-III

Circle No. XIV Voucher No. ..... Dated .....

In continuation of Muster Roll No. 4217

PART-NOMINAL-ROLL

Accountant (HG) CHIEF MEDICAL OFFICER (S) CMO (HG) on Leave

S.No.	Name, Father's/Husband's Name & Address grouped according to classes	Designation	Dates From ... To ...	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
11	Kamlesh w/o ~~Shivdut~~ सुशील Shashi, 10 Jangpura Delhi	Deuly weaver S/K	S 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	114 / 12 days	125-08 + CA / P.M	1591 / 1655=00	[illegible]
12	Laxmi w/o Ashok 20 Sakarpur Delhi	"	S 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	12 days	"	1655=00	[illegible]
13	Anita w/o Rajkumar 10/1 Trilokpuri Delhi	"	S 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	12 days	"	1655=00	[illegible]
14	Bimla w/o Raju 1/30 Tilakpuri Delhi	"	S 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	12 days	"	1655=00	paid. [illegible]
15	Rajesh S/o Sukaram 3/45 Trilokpuri Delhi	"	S 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	12 days	"	1655=00	[illegible]
	Daily Total		S 15 15 15 15 15 15 S 15 15 15 15 15 15	174	G. Total	23991=00	
	Initials of person marking the daily attendance		S [illegible] S [illegible]				
	Initials of Inspecting Officer		S [illegible] S [illegible]				

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. 4259 (From 1/6/08 To 14/06/08)

Contd. sheet-II

Circle No. XIV Voucher No. ..... Dated .....

In continuation of Muster Roll No. 4217

PART-NOMINAL-ROLL

Accountant (HG) CHIEF MEDICAL OFFICER (S) (MO (HG) on leave)

S.No.	Name, Father's/Husband's Name & Address grouped according to classes	Designation	Dates From ... To ...	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	Lokesh S/o Bir Singh 1/2 Madangir Delhi	Daily wager S.K.	S 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	57 11 days	138-25 +CA	7858-00 1516-00	
7	Kamal S/o Takechand 35/420 Trilokpuri Del	"	S 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	11 days	"	1516-00	
8	Amit S/o Jaikishan 10/1 Kalyanpuri Delhi	"	S 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	12 days	"	1655-00	
9	Premo W/o Tilak Raj 20 Shanghu Vihar Delhi	"	S 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	11 days	"	1516-00	
10	Rajesh S/o Sultan Singh Krol Bagh 20 pm	"	S 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	12 days	"	1655=00	
	Daily Total		S 10 10 10 3 10 10 S 4 10 10 10 10 10	144	G. Total	15716-00	
	Initials of person marking the daily attendance		S [illegible]	114			
	Initials of Inspecting Officer		S [illegible]				

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.

(23)

HEALTH DEPARTMENT

Contd. Sheet-I

MUSTER ROLL NO. 4259. (From 1/6/08 To 14/06/08)

Circle No. XIV Voucher No. ..... Dated .....

In continuation of Muster Roll No. 4217

PART-NOMINAL-ROLL

Accountant (HG) CHIEF MEDICAL OFFICER (S) CMO (HQ) on Leave

S.No.	Name, Father's/Husband's Name & Address grouped according to classes	Designation	Dates From ..... To ..... (1–31)	Total	Per day 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	Vikky S/o Nathi Ram W/450 Tirlok Puri Delhi	Daily Wealer SK.	S (A) S	11 days	135.25 + CA 68/- P.M	1516.00	Vicky Attested
2	Umesh S/o Jai Karan 2/522 Mayfal Pur Delhi	"	S S	12 days	"	1655.00	उमेश Attested
3	Rakesh S/o Beer Singh Nichingdelhi 62.	"	S S	12 days	"	1655.00	राकेश Attested
4	Geeta W/o Sajan Singh 2 PR lane Delhi	"	S (A) S	11 days	"	1516.00	गीता देवी Attested
5	Sroj W/o Jagdish 10 Khan market Delhi	"	S (A) S	11 days	"	1516.00	2-12-15 Attested
	Daily Total		S S S S S S S S S S S S S	57	G. Total	7858.00	
	Initials of person marking the daily attendance						
	Initials of Inspecting Officer		S N S N				

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